

Fill in this information to identify your case:

United States Bankruptcy Court for the:

SOUTHERN DISTRICT OF WEST VIRGINIA

Case number (if known) _____

Chapter you are filing under:

- Chapter 7
- Chapter 11
- Chapter 12
- Chapter 13

Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

About Debtor 1:

1. Your full name

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bring your picture identification to your meeting with the trustee.

Aaron

First name

Drew Glen

Middle name

Withrow

Last name and Suffix (Sr., Jr., II, III)

About Debtor 2 (Spouse Only in a Joint Case):

Megan

First name

Inez

Middle name

Scites

Last name and Suffix (Sr., Jr., II, III)

2. All other names you have used in the last 8 years

Include your married or maiden names.

Megan Inez Withrow

3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)

xxx-xx-9685

xxx-xx-9846

Debtor 1 **Aaron Drew Glen Withrow**
Debtor 2 **Megan Inez Scites**

Case number (if known)

About Debtor 1:

4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years

- I have not used any business name or EINs.

Include trade names and *doing business as* names

Business name(s)

EINs

About Debtor 2 (Spouse Only in a Joint Case):

- I have not used any business name or EINs.

Business name(s)

EINs

5. Where you live

**Rt. 2 Box 726
Milton, WV 25541**

Number, Street, City, State & ZIP Code

Cabell

County

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

Number, P.O. Box, Street, City, State & ZIP Code

If Debtor 2 lives at a different address:

Number, Street, City, State & ZIP Code

County

If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.

Number, P.O. Box, Street, City, State & ZIP Code

6. Why you are choosing this district to file for bankruptcy

Check one:

- Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- I have another reason.
Explain. (See 28 U.S.C. § 1408.)

Check one:

- Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- I have another reason.
Explain. (See 28 U.S.C. § 1408.)

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

Part 2: Tell the Court About Your Bankruptcy Case

7. **The chapter of the Bankruptcy Code you are choosing to file under** Check one. (For a brief description of each, see *Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy* (Form 2010)). Also, go to the top of page 1 and check the appropriate box.

Chapter 7
 Chapter 11
 Chapter 12
 Chapter 13

8. **How you will pay the fee** **I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.
 I need to pay the fee in installments. If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).
 I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.

9. **Have you filed for bankruptcy within the last 8 years?** No.
 Yes.

District _____	When _____	Case number _____
District _____	When _____	Case number _____
District _____	When _____	Case number _____

10. **Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?** No
 Yes.

Debtor _____	Relationship to you _____	
District _____	When _____	Case number, if known _____
Debtor _____	Relationship to you _____	
District _____	When _____	Case number, if known _____

11. **Do you rent your residence?** No. Go to line 12.
 Yes. Has your landlord obtained an eviction judgment against you?
 No. Go to line 12.
 Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it with this bankruptcy petition.

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known)

Part 3: Report About Any Businesses You Own as a Sole Proprietor

- 12. Are you a sole proprietor of any full- or part-time business?**

No. Go to Part 4.

Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

Name of business, if any

Number, Street, City, State & ZIP Code

Check the appropriate box to describe your business:

- Health Care Business (as defined in 11 U.S.C. § 101(27A))
- Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- Stockbroker (as defined in 11 U.S.C. § 101(53A))
- Commodity Broker (as defined in 11 U.S.C. § 101(6))
- None of the above

- 13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?**

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).

No. I am not filing under Chapter 11.

No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.

Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

- 14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?**

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

No.

Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Debtor 1 Aaron Drew Glen Withrow
Debtor 2 Megan Inez Scites

Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling**15. Tell the court whether you have received a briefing about credit counseling.**

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:*You must check one:*

- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

- I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- I am not required to receive a briefing about credit counseling because of:

 Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

 Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

 Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):*You must check one:*

- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

- I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- I am not required to receive a briefing about credit counseling because of:

 Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

 Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

 Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 **Aaron Drew Glen Withrow**
Debtor 2 **Megan Inez Scites**

Case number (if known)

Part 6: Answer These Questions for Reporting Purposes

16. What kind of debts do you have?	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."		
	<input type="checkbox"/> No. Go to line 16b. <input checked="" type="checkbox"/> Yes. Go to line 17.		
16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.	<input type="checkbox"/> No. Go to line 16c. <input type="checkbox"/> Yes. Go to line 17.		
16c. State the type of debts you owe that are not consumer debts or business debts			
<hr/>			
17. Are you filing under Chapter 7?	<input type="checkbox"/> No. I am not filing under Chapter 7. Go to line 18. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? <input checked="" type="checkbox"/> Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
<hr/>			
18. How many Creditors do you estimate that you owe?	<input type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input checked="" type="checkbox"/> 100-199 <input type="checkbox"/> 200-999	<input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5001-10,000 <input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> More than 100,000
<hr/>			
19. How much do you estimate your assets to be worth?	<input checked="" type="checkbox"/> \$0 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$500,000 <input type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$1,000,001 - \$10 million <input type="checkbox"/> \$10,000,001 - \$50 million <input type="checkbox"/> \$50,000,001 - \$100 million <input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> \$500,000,001 - \$1 billion <input type="checkbox"/> \$1,000,000,001 - \$10 billion <input type="checkbox"/> \$10,000,000,001 - \$50 billion <input type="checkbox"/> More than \$50 billion
<hr/>			
20. How much do you estimate your liabilities to be?	<input type="checkbox"/> \$0 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input checked="" type="checkbox"/> \$100,001 - \$500,000 <input type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$1,000,001 - \$10 million <input type="checkbox"/> \$10,000,001 - \$50 million <input type="checkbox"/> \$50,000,001 - \$100 million <input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> \$500,000,001 - \$1 billion <input type="checkbox"/> \$1,000,000,001 - \$10 billion <input type="checkbox"/> \$10,000,000,001 - \$50 billion <input type="checkbox"/> More than \$50 billion

Part 7: Sign Below

For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Aaron Drew Glen Withrow**Aaron Drew Glen Withrow**

Signature of Debtor 1

/s/ Megan Inez Scites**Megan Inez Scites**

Signature of Debtor 2

Executed on March 21, 2019
MM / DD / YYYYExecuted on March 21, 2019
MM / DD / YYYY

Debtor 1 **Aaron Drew Glen Withrow**
Debtor 2 **Megan Inez Scites**

Case number *(if known)*

For your attorney, if you are represented by one

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

If you are not represented by an attorney, you do not need to file this page.

/s/ Scott G. Stapleton

Signature of Attorney for Debtor

Date

March 21, 2019

MM / DD / YYYY

Scott G. Stapleton 3568

Printed name

Stapleton Law Offices

Firm name

400 Fifth Avenue

Huntington, WV 25701

Number, Street, City, State & ZIP Code

Contact phone

304-529-7391

Email address

bankrupter@charter.net

3568 WV

Bar number & State

Fill in this information to identify your case:

Debtor 1	Aaron Drew Glen Withrow		
	First Name	Middle Name	Last Name
Debtor 2	Megan Inez Scites		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	SOUTHERN DISTRICT OF WEST VIRGINIA		
Case number (if known)			

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets

		Your assets
		Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	
1a.	Copy line 55, Total real estate, from Schedule A/B.....	\$ 0.00
1b.	Copy line 62, Total personal property, from Schedule A/B.....	\$ 28,400.00
1c.	Copy line 63, Total of all property on Schedule A/B.....	\$ 28,400.00

Part 2: Summarize Your Liabilities

		Your liabilities
		Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	
2a.	Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i> ...	\$ 24,776.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	
3a.	Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>	\$ 0.00
3b.	Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>	\$ 310,879.00
		Your total liabilities \$ 335,655.00

Part 3: Summarize Your Income and Expenses

4.	Schedule I: Your Income (Official Form 106I)	
	Copy your combined monthly income from line 12 of <i>Schedule I</i>	\$ 3,232.64
5.	Schedule J: Your Expenses (Official Form 106J)	
	Copy your monthly expenses from line 22c of <i>Schedule J</i>	\$ 3,497.00

Part 4: Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Yes

7. What kind of debt do you have?

Your debts are primarily consumer debts. *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Debtor 1 **Aaron Drew Glen Withrow**
Debtor 2 **Megan Inez Scites**

Case number (if known) _____

8. **From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$	<u>3,945.00</u>
----	-----------------

9. **Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:**

From Part 4 on Schedule E/F, copy the following:	Total claim
9a. Domestic support obligations (Copy line 6a.)	\$ <u>0.00</u>
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$ <u>0.00</u>
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$ <u>0.00</u>
9d. Student loans. (Copy line 6f.)	\$ <u>195,177.00</u>
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ <u>0.00</u>
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$ <u>0.00</u>
9g. Total. Add lines 9a through 9f.	\$ <u>195,177.00</u>

Fill in this information to identify your case and this filing:

Debtor 1	Aaron Drew Glen Withrow		
	First Name	Middle Name	Last Name
Debtor 2	Megan Inez Scites		
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: SOUTHERN DISTRICT OF WEST VIRGINIA			
Case number			<input type="checkbox"/> Check if this is an amended filing

Official Form 106A/B Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- No. Go to Part 2.
 Yes. Where is the property?

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- No
 Yes

3.1 Make: Jeep Model: Renegade Year: 2017 Approximate mileage: _____ Other information: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	Who has an interest in the property? Check one <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this is community property (see instructions)	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.	
		Current value of the entire property?	Current value of the portion you own?
		\$16,000.00	\$16,000.00

3.2 Make: Chevy Model: K1500 Year: 1997 Approximate mileage: _____ Other information: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	Who has an interest in the property? Check one <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this is community property (see instructions)	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.	
		Current value of the entire property?	Current value of the portion you own?
		\$2,000.00	\$1,000.00

Debtor 1 **Aaron Drew Glen Withrow**
Debtor 2 **Megan Inez Scites**

Case number (if known) _____

3.3 Make: <u>Ford</u>	Who has an interest in the property? Check one	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.	
Model: <u>Flex</u>	<input type="checkbox"/> Debtor 1 only	Current value of the entire property?	Current value of the portion you own?
Year: <u>2009</u>	<input type="checkbox"/> Debtor 2 only		
Approximate mileage: _____	<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only		
Other information:	<input type="checkbox"/> At least one of the debtors and another		
<input type="checkbox"/> Check if this is community property (see instructions)		\$4,500.00	\$4,500.00

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories
Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

 No Yes

4.1 Make: <u>Fishing Boat</u>	Who has an interest in the property? Check one	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.	
Model: _____	<input type="checkbox"/> Debtor 1 only	Current value of the entire property?	Current value of the portion you own?
Year: <u>1969</u>	<input type="checkbox"/> Debtor 2 only		
Other information:	<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only		
<input type="checkbox"/> At least one of the debtors and another			
<input type="checkbox"/> Check if this is community property (see instructions)		\$1,000.00	\$1,000.00
4.2 Make: <u>Utility Trailer</u>	Who has an interest in the property? Check one	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.	
Model: _____	<input type="checkbox"/> Debtor 1 only	Current value of the entire property?	Current value of the portion you own?
Year: _____	<input type="checkbox"/> Debtor 2 only		
Other information:	<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only		
<input type="checkbox"/> At least one of the debtors and another			
<input type="checkbox"/> Check if this is community property (see instructions)		\$500.00	\$500.00

5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....=>

\$23,000.00**Part 3: Describe Your Personal and Household Items**

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
Do not deduct secured claims or exemptions.**6. Household goods and furnishings****Examples:** Major appliances, furniture, linens, china, kitchenware No Yes. Describe.....**One lot miscellaneous household goods and furnishings****\$1,500.00****7. Electronics****Examples:** Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games No Yes. Describe.....**8. Collectibles of value****Examples:** Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No

Debtor 1 **Aaron Drew Glen Withrow**
Debtor 2 **Megan Inez Scites**

Case number (if known) _____

Yes. Describe.....

9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

No

Yes. Describe.....

10. Firearms

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

No

Yes. Describe.....

2 Pistols

\$450.00

11. Clothes

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

No

Yes. Describe.....

Clothing

\$1,000.00

12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

No

Yes. Describe.....

Jewelry

\$500.00

13. Non-farm animals

Examples: Dogs, cats, birds, horses

No

Yes. Describe.....

14. Any other personal and household items you did not already list, including any health aids you did not list

No

Yes. Give specific information.....

Micellaneous property of any kind

\$200.00

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

\$3,650.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

No

Yes.....

Cash on hand

\$100.00

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

No

Yes.....

Institution name: _____

17.1.

Bank Accounts

\$250.00

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

No

Yes.....

Institution or issuer name: _____

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

No

Yes. Give specific information about them.....

Name of entity: _____

% of ownership: _____

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.

Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

No

Yes. Give specific information about them

Issuer name: _____

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

No

Yes. List each account separately.

Type of account: _____

Institution name: _____

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

No

Yes.

Institution name or individual: _____

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

No

Yes..... Issuer name and description: _____

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

No

Yes.....

Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

No

Yes. Give specific information about them...

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

No

Yes. Give specific information about them...

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

No

Yes. Give specific information about them...

Money or property owed to you?

Current value of the

Debtor 1 **Aaron Drew Glen Withrow**
Debtor 2 **Megan Inez Scites**

Case number (if known)

portion you own?
Do not deduct secured
claims or exemptions.

28. Tax refunds owed to you

- No
 Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

- No
 Yes. Give specific information.....

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

- No
 Yes. Give specific information..

Wages	\$700.00
--------------	-----------------

Wages	\$700.00
--------------	-----------------

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

- No
 Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund
value:

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

- No
 Yes. Give specific information..

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

- No
 Yes. Describe each claim.....

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

- No
 Yes. Describe each claim.....

35. Any financial assets you did not already list

- No
 Yes. Give specific information..

**36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached
for Part 4. Write that number here.....**

\$1,750.00

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

- No. Go to Part 6.
 Yes. Go to line 38.

Debtor 1 **Aaron Drew Glen Withrow**
Debtor 2 **Megan Inez Scites**

Case number (if known) _____

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.
If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

- No. Go to Part 7.
 Yes. Go to line 47.

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

- No
 Yes. Give specific information.....

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2	\$0.00
56. Part 2: Total vehicles, line 5	\$23,000.00
57. Part 3: Total personal and household items, line 15	\$3,650.00
58. Part 4: Total financial assets, line 36	\$1,750.00
59. Part 5: Total business-related property, line 45	\$0.00
60. Part 6: Total farm- and fishing-related property, line 52	\$0.00
61. Part 7: Total other property not listed, line 54	\$0.00
62. Total personal property. Add lines 56 through 61...	\$28,400.00
	Copy personal property total
63. Total of all property on Schedule A/B. Add line 55 + line 62	\$28,400.00

Fill in this information to identify your case:

Debtor 1	Aaron Drew Glen Withrow		
	First Name	Middle Name	Last Name
Debtor 2	Megan Inez Scites		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	SOUTHERN DISTRICT OF WEST VIRGINIA		
Case number (if known)			

Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from <i>Schedule A/B</i>	Check only one box for each exemption.	
1997 Chevy K1500 Line from <i>Schedule A/B</i> : 3.2	\$1,000.00	<input checked="" type="checkbox"/> \$1,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	W. Va. Code § 38-10-4(b)
2009 Ford Flex Line from <i>Schedule A/B</i> : 3.3	\$4,500.00	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	W. Va. Code § 38-10-4(b)
1969 Fishing Boat Line from <i>Schedule A/B</i> : 4.1	\$1,000.00	<input checked="" type="checkbox"/> \$1,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	W. Va. Code § 38-10-4(e)
Utility Trailer Line from <i>Schedule A/B</i> : 4.2	\$500.00	<input checked="" type="checkbox"/> \$500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	W. Va. Code § 38-10-4(e)
One lot miscellaneous household goods and furnishings Line from <i>Schedule A/B</i> : 6.1	\$1,500.00	<input checked="" type="checkbox"/> \$1,500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	W. Va. Code § 38-10-4(c)

Debtor 1 **Aaron Drew Glen Withrow**
Debtor 2 **Megan Inez Scites**

Case number (if known) _____

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own Copy the value from <i>Schedule A/B</i>	Amount of the exemption you claim <i>Check only one box for each exemption.</i>	Specific laws that allow exemption
2 Pistols Line from <i>Schedule A/B: 10.1</i>	<u>\$450.00</u>	<input checked="" type="checkbox"/> \$450.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	W. Va. Code § 38-10-4(e)
Clothing Line from <i>Schedule A/B: 11.1</i>	<u>\$1,000.00</u>	<input checked="" type="checkbox"/> \$1,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	W. Va. Code § 38-10-4(c)
Jewelry Line from <i>Schedule A/B: 12.1</i>	<u>\$500.00</u>	<input checked="" type="checkbox"/> \$500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	W. Va. Code § 38-10-4(d)
Miscellaneous property of any kind Line from <i>Schedule A/B: 14.1</i>	<u>\$200.00</u>	<input checked="" type="checkbox"/> \$200.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	W. Va. Code § 38-10-4(e)
Cash on hand Line from <i>Schedule A/B: 16.1</i>	<u>\$100.00</u>	<input checked="" type="checkbox"/> \$100.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	W. Va. Code § 38-10-4(e)
Bank Accounts Line from <i>Schedule A/B: 17.1</i>	<u>\$250.00</u>	<input checked="" type="checkbox"/> \$250.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	W. Va. Code § 38-10-4(e)
Wages Line from <i>Schedule A/B: 30.1</i>	<u>\$700.00</u>	<input checked="" type="checkbox"/> \$700.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	W. Va. Code § 38-5A-3
Wages Line from <i>Schedule A/B: 30.2</i>	<u>\$700.00</u>	<input checked="" type="checkbox"/> \$700.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	W. Va. Code § 38-5A-3

3. Are you claiming a homestead exemption of more than \$160,375?

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

- No
- Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
- No
- Yes

Fill in this information to identify your case:

Debtor 1	Aaron Drew Glen Withrow		
	First Name	Middle Name	Last Name
Debtor 2	Megan Inez Scites		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	SOUTHERN DISTRICT OF WEST VIRGINIA		
Case number (if known)			

Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

2.1	Creditor's Name	Describe the property that secures the claim:	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion if any
	Exeter Finance Corp Creditor's Name	2017 Jeep Renegade	\$20,276.00	\$16,000.00	\$4,276.00

**Po Box 166097
Irving, TX 75016**

Number, Street, City, State & Zip Code

Who owes the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset) _____

Opened
08/17 Last
Active
Date debt was incurred **3/28/18**

Last 4 digits of account number **1001**

2.2	Creditor's Name	Describe the property that secures the claim:	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion if any
	Fairchild Auto Creditor's Name	2009 Ford Flex	\$4,500.00	\$4,500.00	\$0.00

**10711 US Rt. 23
Greenup, KY 41144**

Number, Street, City, State & Zip Code

Who owes the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit

Debtor 1 Aaron Drew Glen Withrow	First Name _____	Middle Name _____	Last Name _____	Case number (if known) _____
Debtor 2 Megan Inez Scites	First Name _____	Middle Name _____	Last Name _____	
<input type="checkbox"/> Check if this claim relates to a community debt		<input type="checkbox"/> Other (including a right to offset) _____		
Date debt was incurred _____	Last 4 digits of account number _____			

Add the dollar value of your entries in Column A on this page. Write that number here: **\$24,776.00**
If this is the last page of your form, add the dollar value totals from all pages.
Write that number here: **\$24,776.00**

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Name, Number, Street, City, State & Zip Code
Exeter Finance Corp
Po Box 166008
Irving, TX 75016

On which line in Part 1 did you enter the creditor? **2.1**

Last 4 digits of account number _____

Fill in this information to identify your case:

Debtor 1	Aaron Drew Glen Withrow		
	First Name	Middle Name	Last Name
Debtor 2	Megan Inez Scites		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	SOUTHERN DISTRICT OF WEST VIRGINIA		
Case number (if known)			

Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

- No. Go to Part 2.
 Yes.

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

- No. You have nothing to report in this part. Submit this form to the court with your other schedules.
 Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

			Total claim
4.1	Aes/pnc Bank Nonpriority Creditor's Name	Last 4 digits of account number	0001 \$3,831.00
	Pob 61047 Harrisburg, PA 17106	When was the debt incurred?	Opened 09/08 Last Active 9/27/16
	Number Street City State Zip Code	As of the date you file, the claim is:	Check all that apply
	Who incurred the debt? Check one.		
	<input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____
			Educational

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.2	Aes/pnc Bank Nonpriority Creditor's Name	Last 4 digits of account number 0003	\$2,104.00
Pob 61047 Harrisburg, PA 17106			
Number Street City State Zip Code			
Who incurred the debt? Check one.			
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another			
<input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____			
Is the claim subject to offset?			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Contingent <input type="checkbox"/> Yes <input type="checkbox"/> Unliquidated			
Educational			
4.3	Aes/pnc Bank Nonpriority Creditor's Name	Last 4 digits of account number 0002	\$1,487.00
Pob 61047 Harrisburg, PA 17106			
Number Street City State Zip Code			
Who incurred the debt? Check one.			
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another			
<input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____			
Is the claim subject to offset?			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Contingent <input type="checkbox"/> Yes <input type="checkbox"/> Unliquidated			
Educational			
4.4	AmeriCredit/GM Financial Nonpriority Creditor's Name	Last 4 digits of account number 9567	\$12,077.00
Po Box 181145 Arlington, TX 76096			
Number Street City State Zip Code			
Who incurred the debt? Check one.			
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another			
<input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify Automobile			
Is the claim subject to offset?			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Contingent <input type="checkbox"/> Yes <input type="checkbox"/> Unliquidated			

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.5	Ashland Credit Union Nonpriority Creditor's Name 1300 Central Ave Ashland, KY 41101 Number Street City State Zip Code	Last 4 digits of account number 7100	Unknown
		When was the debt incurred? Opened 01/12 Last Active 12/28/16	
	As of the date you file, the claim is: Check all that apply		
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Student loans <input type="checkbox"/> Is the claim subject to offset? <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input checked="" type="checkbox"/> No <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Yes <input checked="" type="checkbox"/> Other. Specify Automobile		
4.6	Cabell Huntington Hospital Nonpriority Creditor's Name P O Box 580021 Charlotte, NC 28258-0021 Number Street City State Zip Code	Last 4 digits of account number various	\$750.00
		When was the debt incurred?	
	As of the date you file, the claim is: Check all that apply		
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Student loans <input type="checkbox"/> Is the claim subject to offset? <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input checked="" type="checkbox"/> No <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Yes <input checked="" type="checkbox"/> Other. Specify _____		
4.7	Cabell Urgent Care Nonpriority Creditor's Name 1 Stonecrest Drive Huntington, WV 25701-9391 Number Street City State Zip Code	Last 4 digits of account number	Unknown
		When was the debt incurred?	
	As of the date you file, the claim is: Check all that apply		
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Student loans <input type="checkbox"/> Is the claim subject to offset? <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input checked="" type="checkbox"/> No <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Yes <input checked="" type="checkbox"/> Other. Specify _____		

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.8	<p>Capital Management Services Nonpriority Creditor's Name 726 Exchange St., Suite 700 Buffalo, NY 14210-1494 Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify <u>Collection agency for Chase & Discover</u></p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number _____ Unknown</p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p>
------------	---	--

4.9	<p>Capital One Nonpriority Creditor's Name 15000 Capital One Dr Richmond, VA 23238 Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent</p> <p><input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify <u>Credit Card</u></p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number 1496 \$1,920.00</p> <p>When was the debt incurred? Opened 01/07 Last Active 4/03/18</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p>
------------	---	--

4.1	<p>Capital One Nonpriority Creditor's Name 15000 Capital One Dr Richmond, VA 23238 Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify <u>Credit Card</u></p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number 4098 \$570.00</p> <p>When was the debt incurred? Opened 02/17 Last Active 2/08/18</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p>
------------	---	--

Debtor 1 **Aaron Drew Glen Withrow**
Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.1 1	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	9058	\$463.00
	Po Box 30253 Salt Lake City, UT 84130 Number Street City State Zip Code	When was the debt incurred?	Opened 08/17 Last Active 4/18/18	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt 	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card		
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.1 2	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	1152	\$207.00
	15000 Capital One Dr Richmond, VA 23238 Number Street City State Zip Code	When was the debt incurred?	Opened 08/09 Last Active 4/23/18	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	<input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt 	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card		
4.1 3	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	9132	Unknown
	15000 Capital One Dr Richmond, VA 23238 Number Street City State Zip Code	When was the debt incurred?	Opened 8/10/09 Last Active 4/24/17	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt 	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card		
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1 **Aaron Drew Glen Withrow**
Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.1 4	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	1496	\$2,423.00
	15000 Capital One Dr Richmond, VA 23238 Number Street City State Zip Code	When was the debt incurred?	Opened 01/07 Last Active 4/03/18	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Contingent		
	<input checked="" type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Disputed		
	<input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	<input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
	Is the claim subject to offset?	<input checked="" type="checkbox"/> Other. Specify Credit Card		
	<input type="checkbox"/> No			
	<input type="checkbox"/> Yes			

4.1 5	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	9058	\$670.00
	Po Box 30253 Salt Lake City, UT 84130 Number Street City State Zip Code	When was the debt incurred?	Opened 8/04/17 Last Active 4/18/18	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Contingent		
	<input checked="" type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Disputed		
	<input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	<input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
	Is the claim subject to offset?	<input checked="" type="checkbox"/> Other. Specify Credit Card		
	<input type="checkbox"/> No			
	<input type="checkbox"/> Yes			

4.1 6	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	9132	Unknown
	15000 Capital One Dr Richmond, VA 23238 Number Street City State Zip Code	When was the debt incurred?	Opened 8/10/09 Last Active 4/24/17	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	<input checked="" type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Contingent		
	<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Disputed		
	<input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	<input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
	Is the claim subject to offset?	<input checked="" type="checkbox"/> Other. Specify Credit Card		
	<input type="checkbox"/> No			
	<input type="checkbox"/> Yes			

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.1 7	Carson Smithfield Advanta Nonpriority Creditor's Name	Last 4 digits of account number _____	Unknown
P.O. Box 9216 Old Bethpage, NY 11804-9216 Number Street City State Zip Code		When was the debt incurred? _____	
Who incurred the debt? Check one.			
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Other. Specify _____			
As of the date you file, the claim is: Check all that apply			
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____			
Is the claim subject to offset?		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Chase Card Services Nonpriority Creditor's Name		Last 4 digits of account number 2863	\$959.00
Po Box 15298 Wilmington, DE 19850 Number Street City State Zip Code		When was the debt incurred? Opened 07/14 Last Active 3/27/18	
Who incurred the debt? Check one.			
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Other. Specify Credit Card			
As of the date you file, the claim is: Check all that apply			
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts			
Is the claim subject to offset?		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
4.1 9	Chase Card Services Nonpriority Creditor's Name	Last 4 digits of account number 6761	\$945.00
Po Box 15298 Wilmington, DE 19850 Number Street City State Zip Code		When was the debt incurred? Opened 11/09 Last Active 3/27/18	
Who incurred the debt? Check one.			
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Other. Specify Credit Card			
As of the date you file, the claim is: Check all that apply			
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts			
Is the claim subject to offset?		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor 1 **Aaron Drew Glen Withrow**
Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.2 0	Chase Card Services Nonpriority Creditor's Name	Last 4 digits of account number 2863	\$1,398.00
	Po Box 15298 Wilmington, DE 19850 Number Street City State Zip Code	When was the debt incurred? Opened 07/14 Last Active 4/27/18	
	Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card	
4.2 1	Chase Card Services Nonpriority Creditor's Name	Last 4 digits of account number 6761	\$1,338.00
	Po Box 15298 Wilmington, DE 19850 Number Street City State Zip Code	When was the debt incurred? Opened 11/09 Last Active 4/27/18	
	Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card	
4.2 2	Citibank/The Home Depot Nonpriority Creditor's Name	Last 4 digits of account number 6853	\$1,030.00
	Po Box 6497 Sioux Falls, SD 57117 Number Street City State Zip Code	When was the debt incurred? Opened 11/15 Last Active 4/13/18	
	Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Charge Account	

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.2 3	<p>Citibank/The Home Depot <small>Nonpriority Creditor's Name</small></p> <p>Po Box 6497 Sioux Falls, SD 57117 <small>Number Street City State Zip Code</small></p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>6853</u></p> <p>When was the debt incurred? <u>Opened 11/12/15 Last Active 3/10/17</u></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Charge Account</u></p>	<p>Unknown</p>
4.2 4	<p>CitiFinancial <small>Nonpriority Creditor's Name</small></p> <p>4010 Regent Blvd Irving, TX 75063 <small>Number Street City State Zip Code</small></p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number _____</p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Notice Only</u></p>	<p>Unknown</p>
4.2 5	<p>Client Services <small>Nonpriority Creditor's Name</small></p> <p>3451 Harry Truman Blvd Saint Charles, MO 63301 <small>Number Street City State Zip Code</small></p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number _____</p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify _____</p>	<p>Unknown</p>

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.2
6**CNAC**

Nonpriority Creditor's Name

**PO Box 8481
Charleston, WV 25303**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only Contingent
 Debtor 2 only Unliquidated
 Debtor 1 and Debtor 2 only Disputed
 At least one of the debtors and another
 Check if this claim is for a community debt
Is the claim subject to offset?
 No Other. Specify _____
 Yes

Last 4 digits of account number _____

Unknown**When was the debt incurred?** _____**As of the date you file, the claim is:** Check all that apply

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify _____

4.2
7**Cnac - Oh128**

Nonpriority Creditor's Name

**200 Greene Ave
Marietta, OH 45750**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only Contingent
 Debtor 2 only Unliquidated
 Debtor 1 and Debtor 2 only Disputed
 At least one of the debtors and another
 Check if this claim is for a community debt
Is the claim subject to offset?
 No Other. Specify **repo deficiency**
 Yes

Last 4 digits of account number **0321****\$13,307.00****Opened 02/18 Last Active
3/31/18****As of the date you file, the claim is:** Check all that apply

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **repo deficiency**

4.2
8**Cnac - Oh128**

Nonpriority Creditor's Name

**200 Greene Ave
Marietta, OH 45750**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only Contingent
 Debtor 2 only Unliquidated
 Debtor 1 and Debtor 2 only Disputed
 At least one of the debtors and another
 Check if this claim is for a community debt
Is the claim subject to offset?
 No Other. Specify **Automobile**
 Yes

Last 4 digits of account number **4017****Unknown****Opened 07/16 Last Active
5/17/17****As of the date you file, the claim is:** Check all that apply

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **Automobile**

Debtor 1 **Aaron Drew Glen Withrow**
Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.2 9	Cnac - Oh128 Nonpriority Creditor's Name	Last 4 digits of account number 0321	Unknown
	200 Green St Marietta, OH 45750 Number Street City State Zip Code	When was the debt incurred? Opened 02/18 Last Active 2/28/19	
	As of the date you file, the claim is: Check all that apply		
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify Automobile <input type="checkbox"/> Yes		
4.3 0	Cnac - Oh128 Nonpriority Creditor's Name	Last 4 digits of account number 4017	Unknown
	200 Green St Marietta, OH 45750 Number Street City State Zip Code	When was the debt incurred? Opened 07/16 Last Active 5/17/17	
	As of the date you file, the claim is: Check all that apply		
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify Automobile <input type="checkbox"/> Yes		
4.3 1	Comenity Bank/Dress Barn Nonpriority Creditor's Name	Last 4 digits of account number 3138	Unknown
	Po Box 182789 Columbus, OH 43218 Number Street City State Zip Code	When was the debt incurred? Opened 07/07 Last Active 1/29/10	
	As of the date you file, the claim is: Check all that apply		
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify Charge Account <input type="checkbox"/> Yes		

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.3 2	Comenity Bank/Dress Barn Nonpriority Creditor's Name	Last 4 digits of account number 3138	Unknown
	Po Box 182789 Columbus, OH 43218 Number Street City State Zip Code	When was the debt incurred? Opened 07/07 Last Active 1/29/10	
	As of the date you file, the claim is: Check all that apply		
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Other. Specify Charge Account		
	Type of NONPRIORITY unsecured claim:		
	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
	Is the claim subject to offset?		
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
4.3 3	Comenity Bank/Torrid Nonpriority Creditor's Name	Last 4 digits of account number 5022	\$917.00
	Po Box 182789 Columbus, OH 43218 Number Street City State Zip Code	When was the debt incurred? Opened 11/15 Last Active 3/18/18	
	As of the date you file, the claim is: Check all that apply		
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Other. Specify Charge Account		
	Type of NONPRIORITY unsecured claim:		
	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
	Is the claim subject to offset?		
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
4.3 4	Comenity Bank/Torrid Nonpriority Creditor's Name	Last 4 digits of account number 5022	Unknown
	Po Box 182789 Columbus, OH 43218 Number Street City State Zip Code	When was the debt incurred? Opened 11/20/15 Last Active 4/18/18	
	As of the date you file, the claim is: Check all that apply		
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Other. Specify Charge Account		
	Type of NONPRIORITY unsecured claim:		
	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
	Is the claim subject to offset?		
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor 1 Aaron Drew Glen Withrow
Debtor 2 Megan Inez Scites

Case number (if known) _____

4.3

5	Comenity Bkl/Ultा Nonpriority Creditor's Name	Last 4 digits of account number 4389	Unknown
	Po Box 182120 Columbus, OH 43218 Number Street City State Zip Code	When was the debt incurred? Opened 09/17 Last Active 2/20/18	
	As of the date you file, the claim is: Check all that apply		
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Other. Specify Charge Account		
	Type of NONPRIORITY unsecured claim:		
	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
	Is the claim subject to offset?		
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

4.3

6	Comenity Bkl/Ultा Nonpriority Creditor's Name	Last 4 digits of account number 4389	Unknown
	Po Box 182120 Columbus, OH 43218 Number Street City State Zip Code	When was the debt incurred? Opened 9/02/17 Last Active 2/20/18	
	As of the date you file, the claim is: Check all that apply		
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Other. Specify Charge Account		
	Type of NONPRIORITY unsecured claim:		
	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
	Is the claim subject to offset?		
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

4.3

7	Credit One Bank Nonpriority Creditor's Name	Last 4 digits of account number 5549	\$2,227.00
	Po Box 98872 Las Vegas, NV 89193 Number Street City State Zip Code	When was the debt incurred? Opened 08/10 Last Active 4/15/18	
	As of the date you file, the claim is: Check all that apply		
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Other. Specify Credit Card		
	Type of NONPRIORITY unsecured claim:		
	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
	Is the claim subject to offset?		
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.3
8

Credit One Bank Nonpriority Creditor's Name	Last 4 digits of account number	9736	\$703.00
Po Box 98872 Las Vegas, NV 89193	When was the debt incurred?	Opened 03/17 Last Active 2/08/18	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		
Is the claim subject to offset?	<input type="checkbox"/> No <input type="checkbox"/> Other. Specify Credit Card <input checked="" type="checkbox"/> Yes		
Type of NONPRIORITY unsecured claim:			
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts			

4.3
9

Credit One Bank Nonpriority Creditor's Name	Last 4 digits of account number	2311	\$460.00
Po Box 98872 Las Vegas, NV 89193	When was the debt incurred?	Opened 08/16 Last Active 4/12/18	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		
Is the claim subject to offset?	<input type="checkbox"/> No <input type="checkbox"/> Other. Specify Credit Card <input checked="" type="checkbox"/> Yes		
Type of NONPRIORITY unsecured claim:			
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts			

4.4
0

Credit One Bank Nonpriority Creditor's Name	Last 4 digits of account number	5549	Unknown
Po Box 98872 Las Vegas, NV 89193	When was the debt incurred?	Opened 08/10 Last Active 4/14/18	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		
Is the claim subject to offset?	<input type="checkbox"/> No <input type="checkbox"/> Other. Specify Credit Card <input checked="" type="checkbox"/> Yes		
Type of NONPRIORITY unsecured claim:			
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts			

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.4
1

Credit One Bank Nonpriority Creditor's Name	Last 4 digits of account number	2311	Unknown
Po Box 98872 Las Vegas, NV 89193	When was the debt incurred?	Opened 08/16 Last Active 4/11/18	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify Credit Card <input type="checkbox"/> Yes		

4.4
2

Credit One Bank Nonpriority Creditor's Name	Last 4 digits of account number	9736	Unknown
Po Box 98872 Las Vegas, NV 89193	When was the debt incurred?	Opened 03/17 Last Active 2/08/18	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify Credit Card <input type="checkbox"/> Yes		

4.4
3

Debt Collection Partne Nonpriority Creditor's Name	Last 4 digits of account number	3150	\$286.00
11 Commerce Dr Ste 208 Westover, WV 26501	When was the debt incurred?	Opened 03/16	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify Collection Attorney University Physicians Surgeon <input type="checkbox"/> Yes		

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.4 4	Debt Collection Partners Nonpriority Creditor's Name 11 Commerce Dr Ste 208 Westover, WV 26501 Number Street City State Zip Code	Last 4 digits of account number 3150	\$286.00
	Who incurred the debt? Check one.	When was the debt incurred? Opened 03/16	
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	<input type="checkbox"/> Check if this claim is for a community debt	Type of NONPRIORITY unsecured claim:	
	Is the claim subject to offset?	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
		Collection Attorney University Physicians Surgeo	
4.4 5	Department of Education/Nelnet Nonpriority Creditor's Name 3015 Parker Rd Aurora, CO 80014 Number Street City State Zip Code	Last 4 digits of account number 6449	\$11,855.00
	Who incurred the debt? Check one.	When was the debt incurred? Opened 09/12 Last Active 2/28/19	
	<input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	<input type="checkbox"/> Check if this claim is for a community debt	Type of NONPRIORITY unsecured claim:	
	Is the claim subject to offset?	<input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
		Educational	
4.4 6	Department of Education/Nelnet Nonpriority Creditor's Name 3015 Parker Rd Aurora, CO 80014 Number Street City State Zip Code	Last 4 digits of account number 6349	\$9,146.00
	Who incurred the debt? Check one.	When was the debt incurred? Opened 11/11 Last Active 2/28/19	
	<input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	<input type="checkbox"/> Check if this claim is for a community debt	Type of NONPRIORITY unsecured claim:	
	Is the claim subject to offset?	<input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
		Educational	

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.4
7

Department of Education/Nelnet Nonpriority Creditor's Name	Last 4 digits of account number	6049	\$7,533.00
3015 Parker Rd Aurora, CO 80014	When was the debt incurred?	Opened 08/07 Last Active 2/28/19	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<input type="checkbox"/> Debtor 1 only			
<input checked="" type="checkbox"/> Debtor 2 only			
<input type="checkbox"/> Debtor 1 and Debtor 2 only			
<input type="checkbox"/> At least one of the debtors and another			
<input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset?	<input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____		
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes			

Educational

4.4
8

Department of Education/Nelnet Nonpriority Creditor's Name	Last 4 digits of account number	5949	\$5,814.00
3015 Parker Rd Aurora, CO 80014	When was the debt incurred?	Opened 08/07 Last Active 2/28/19	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<input type="checkbox"/> Debtor 1 only			
<input checked="" type="checkbox"/> Debtor 2 only			
<input type="checkbox"/> Debtor 1 and Debtor 2 only			
<input type="checkbox"/> At least one of the debtors and another			
<input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset?	<input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____		
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes			

Educational

4.4
9

Department of Education/Nelnet Nonpriority Creditor's Name	Last 4 digits of account number	2652	\$5,090.00
3015 Parker Rd Aurora, CO 80014	When was the debt incurred?	Opened 07/13 Last Active 2/28/19	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<input type="checkbox"/> Debtor 1 only			
<input checked="" type="checkbox"/> Debtor 2 only			
<input type="checkbox"/> Debtor 1 and Debtor 2 only			
<input type="checkbox"/> At least one of the debtors and another			
<input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset?	<input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____		
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes			

Educational

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.5 0	Department of Education/Nelnet Nonpriority Creditor's Name	Last 4 digits of account number	6549	\$4,962.00
3015 Parker Rd Aurora, CO 80014 Number Street City State Zip Code		When was the debt incurred?	Opened 11/11 Last Active 2/28/19	
As of the date you file, the claim is: Check all that apply				
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed				
Type of NONPRIORITY unsecured claim:				
<input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____				
Educational				
4.5 1	Department of Education/Nelnet Nonpriority Creditor's Name	Last 4 digits of account number	6149	\$3,977.00
3015 Parker Rd Aurora, CO 80014 Number Street City State Zip Code		When was the debt incurred?	Opened 04/11 Last Active 2/28/19	
As of the date you file, the claim is: Check all that apply				
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed				
Type of NONPRIORITY unsecured claim:				
<input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____				
Educational				
4.5 2	Department of Education/Nelnet Nonpriority Creditor's Name	Last 4 digits of account number	5849	\$3,391.00
3015 Parker Rd Aurora, CO 80014 Number Street City State Zip Code		When was the debt incurred?	Opened 09/06 Last Active 2/28/19	
As of the date you file, the claim is: Check all that apply				
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed				
Type of NONPRIORITY unsecured claim:				
<input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____				
Educational				

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.5
3

Department of Education/Nelnet Nonpriority Creditor's Name	Last 4 digits of account number	6649	\$3,357.00
3015 Parker Rd Aurora, CO 80014	When was the debt incurred?	Opened 09/12 Last Active 2/28/19	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<input type="checkbox"/> Debtor 1 only			
<input checked="" type="checkbox"/> Debtor 2 only			
<input type="checkbox"/> Debtor 1 and Debtor 2 only			
<input type="checkbox"/> At least one of the debtors and another			
<input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset?	<input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____		
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes			

Educational

4.5
4

Department of Education/Nelnet Nonpriority Creditor's Name	Last 4 digits of account number	6249	\$3,178.00
3015 Parker Rd Aurora, CO 80014	When was the debt incurred?	Opened 04/11 Last Active 2/28/19	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<input type="checkbox"/> Debtor 1 only			
<input checked="" type="checkbox"/> Debtor 2 only			
<input type="checkbox"/> Debtor 1 and Debtor 2 only			
<input type="checkbox"/> At least one of the debtors and another			
<input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset?	<input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____		
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes			

Educational

4.5
5

Department of Education/Nelnet Nonpriority Creditor's Name	Last 4 digits of account number	3647	\$2,598.00
3015 Parker Rd Aurora, CO 80014	When was the debt incurred?	Opened 11/16 Last Active 2/28/19	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<input type="checkbox"/> Debtor 1 only			
<input checked="" type="checkbox"/> Debtor 2 only			
<input type="checkbox"/> Debtor 1 and Debtor 2 only			
<input type="checkbox"/> At least one of the debtors and another			
<input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset?	<input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____		
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes			

Educational

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.5
6

Department of Education/Nelnet Nonpriority Creditor's Name	Last 4 digits of account number	5949	\$1,953.00
3015 Parker Rd Aurora, CO 80014	When was the debt incurred?	Opened 02/13 Last Active 2/28/19	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<input type="checkbox"/> Debtor 1 only			
<input checked="" type="checkbox"/> Debtor 2 only			
<input type="checkbox"/> Debtor 1 and Debtor 2 only			
<input type="checkbox"/> At least one of the debtors and another			
<input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset?	<input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____		
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes			

Educational

4.5
7

Department of Education/Nelnet Nonpriority Creditor's Name	Last 4 digits of account number	3747	\$649.00
3015 Parker Rd Aurora, CO 80014	When was the debt incurred?	Opened 11/16 Last Active 2/28/19	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<input type="checkbox"/> Debtor 1 only			
<input checked="" type="checkbox"/> Debtor 2 only			
<input type="checkbox"/> Debtor 1 and Debtor 2 only			
<input type="checkbox"/> At least one of the debtors and another			
<input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset?	<input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____		
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes			

Educational

4.5
8

Dept of Ed / 582 / Nelnet Nonpriority Creditor's Name	Last 4 digits of account number	6449	\$11,282.00
121 S 13th St Lincoln, NE 68508	When was the debt incurred?	Opened 09/12 Last Active 3/31/18	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<input type="checkbox"/> Debtor 1 only			
<input checked="" type="checkbox"/> Debtor 2 only			
<input type="checkbox"/> Debtor 1 and Debtor 2 only			
<input type="checkbox"/> At least one of the debtors and another			
<input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset?	<input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____		
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes			

Educational

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.5 9	Dept of Ed / 582 / Nelnet Nonpriority Creditor's Name	Last 4 digits of account number	6349	\$8,704.00
	121 S 13th St Lincoln, NE 68508 Number Street City State Zip Code	When was the debt incurred?	Opened 11/11 Last Active 3/31/18	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Contingent		
	<input checked="" type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Disputed		
	<input type="checkbox"/> At least one of the debtors and another			
	<input type="checkbox"/> Check if this claim is for a community debt	Type of NONPRIORITY unsecured claim:		
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> Student loans		
	<input type="checkbox"/>	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	<input type="checkbox"/>	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
	<input type="checkbox"/> Is the claim subject to offset?	<input type="checkbox"/> Other. Specify _____		
	<input checked="" type="checkbox"/> No			
	<input type="checkbox"/> Yes			

Educational

4.6 0	Dept of Ed / 582 / Nelnet Nonpriority Creditor's Name	Last 4 digits of account number	6049	\$7,218.00
	121 S 13th St Lincoln, NE 68508 Number Street City State Zip Code	When was the debt incurred?	Opened 08/07 Last Active 3/31/18	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Contingent		
	<input checked="" type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Disputed		
	<input type="checkbox"/> At least one of the debtors and another			
	<input type="checkbox"/> Check if this claim is for a community debt	Type of NONPRIORITY unsecured claim:		
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> Student loans		
	<input type="checkbox"/>	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	<input type="checkbox"/>	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
	<input type="checkbox"/> Is the claim subject to offset?	<input type="checkbox"/> Other. Specify _____		
	<input checked="" type="checkbox"/> No			
	<input type="checkbox"/> Yes			

Educational

4.6 1	Dept of Ed / 582 / Nelnet Nonpriority Creditor's Name	Last 4 digits of account number	5949	\$5,627.00
	121 S 13th St Lincoln, NE 68508 Number Street City State Zip Code	When was the debt incurred?	Opened 08/07 Last Active 3/31/18	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Contingent		
	<input checked="" type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Disputed		
	<input type="checkbox"/> At least one of the debtors and another			
	<input type="checkbox"/> Check if this claim is for a community debt	Type of NONPRIORITY unsecured claim:		
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> Student loans		
	<input type="checkbox"/>	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	<input type="checkbox"/>	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
	<input type="checkbox"/> Is the claim subject to offset?	<input type="checkbox"/> Other. Specify _____		
	<input checked="" type="checkbox"/> No			
	<input type="checkbox"/> Yes			

Educational

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.6 2	Dept of Ed / 582 / Nelnet Nonpriority Creditor's Name	Last 4 digits of account number	2652	\$4,935.00
	121 S 13th St Lincoln, NE 68508 Number Street City State Zip Code	When was the debt incurred?	Opened 07/13 Last Active 3/31/18	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Contingent		
	<input checked="" type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Disputed		
	<input type="checkbox"/> At least one of the debtors and another			
	<input type="checkbox"/> Check if this claim is for a community debt	Type of NONPRIORITY unsecured claim:		
	<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Student loans		
	<input type="checkbox"/> Yes	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
		<input type="checkbox"/> Other. Specify _____		

Educational

4.6 3	Dept of Ed / 582 / Nelnet Nonpriority Creditor's Name	Last 4 digits of account number	6549	\$4,872.00
	121 S 13th St Lincoln, NE 68508 Number Street City State Zip Code	When was the debt incurred?	Opened 11/11 Last Active 3/31/18	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Contingent		
	<input checked="" type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Disputed		
	<input type="checkbox"/> At least one of the debtors and another			
	<input type="checkbox"/> Check if this claim is for a community debt	Type of NONPRIORITY unsecured claim:		
	<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Student loans		
	<input type="checkbox"/> Yes	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
		<input type="checkbox"/> Other. Specify _____		

Educational

4.6 4	Dept of Ed / 582 / Nelnet Nonpriority Creditor's Name	Last 4 digits of account number	6149	\$3,883.00
	121 S 13th St Lincoln, NE 68508 Number Street City State Zip Code	When was the debt incurred?	Opened 04/11 Last Active 3/31/18	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Contingent		
	<input checked="" type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Disputed		
	<input type="checkbox"/> At least one of the debtors and another			
	<input type="checkbox"/> Check if this claim is for a community debt	Type of NONPRIORITY unsecured claim:		
	<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Student loans		
	<input type="checkbox"/> Yes	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
		<input type="checkbox"/> Other. Specify _____		

Educational

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.6 5	Dept of Ed / 582 / Nelnet Nonpriority Creditor's Name	Last 4 digits of account number	6649	\$3,296.00
	121 S 13th St Lincoln, NE 68508 Number Street City State Zip Code	When was the debt incurred?	Opened 09/12 Last Active 3/31/18	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Contingent		
	<input checked="" type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Disputed		
	<input type="checkbox"/> At least one of the debtors and another			
	<input type="checkbox"/> Check if this claim is for a community debt	Type of NONPRIORITY unsecured claim:		
	<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Student loans		
	<input type="checkbox"/> Yes	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
		<input type="checkbox"/> Other. Specify _____		

Educational

4.6 6	Dept of Ed / 582 / Nelnet Nonpriority Creditor's Name	Last 4 digits of account number	5849	\$3,282.00
	121 S 13th St Lincoln, NE 68508 Number Street City State Zip Code	When was the debt incurred?	Opened 09/06 Last Active 3/31/18	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Contingent		
	<input checked="" type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Disputed		
	<input type="checkbox"/> At least one of the debtors and another			
	<input type="checkbox"/> Check if this claim is for a community debt	Type of NONPRIORITY unsecured claim:		
	<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Student loans		
	<input type="checkbox"/> Yes	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
		<input type="checkbox"/> Other. Specify _____		

Educational

4.6 7	Dept of Ed / 582 / Nelnet Nonpriority Creditor's Name	Last 4 digits of account number	6249	\$3,025.00
	121 S 13th St Lincoln, NE 68508 Number Street City State Zip Code	When was the debt incurred?	Opened 04/11 Last Active 3/31/18	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Contingent		
	<input checked="" type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Disputed		
	<input type="checkbox"/> At least one of the debtors and another			
	<input type="checkbox"/> Check if this claim is for a community debt	Type of NONPRIORITY unsecured claim:		
	<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Student loans		
	<input type="checkbox"/> Yes	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
		<input type="checkbox"/> Other. Specify _____		

Educational

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.6
8

Dept of Ed / 582 / Nelnet Nonpriority Creditor's Name	Last 4 digits of account number	3647	\$2,515.00
121 S 13th St Lincoln, NE 68508 Number Street City State Zip Code	When was the debt incurred?	Opened 11/16 Last Active 3/31/18	
As of the date you file, the claim is: Check all that apply			
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
Type of NONPRIORITY unsecured claim:			
<input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____			
Educational			

4.6
9

Dept of Ed / 582 / Nelnet Nonpriority Creditor's Name	Last 4 digits of account number	5949	\$1,859.00
121 S 13th St Lincoln, NE 68508 Number Street City State Zip Code	When was the debt incurred?	Opened 02/13 Last Active 3/31/18	
As of the date you file, the claim is: Check all that apply			
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
Type of NONPRIORITY unsecured claim:			
<input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____			
Educational			

4.7
0

Dept of Ed / 582 / Nelnet Nonpriority Creditor's Name	Last 4 digits of account number	3747	\$628.00
121 S 13th St Lincoln, NE 68508 Number Street City State Zip Code	When was the debt incurred?	Opened 11/16 Last Active 3/31/18	
As of the date you file, the claim is: Check all that apply			
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
Type of NONPRIORITY unsecured claim:			
<input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____			
Educational			

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.7 1	Dept of Ed / Navient Nonpriority Creditor's Name	Last 4 digits of account number	0212	\$3,750.00
	Po Box 9635 Wilkes Barre, PA 18773 Number Street City State Zip Code	When was the debt incurred?	Opened 02/13 Last Active 10/26/16	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	<input checked="" type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Contingent		
	<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Disputed		
	<input type="checkbox"/> At least one of the debtors and another			
	<input type="checkbox"/> Check if this claim is for a community debt	Type of NONPRIORITY unsecured claim:		
	<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Student loans		
	<input type="checkbox"/> Yes	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
		<input type="checkbox"/> Other. Specify _____		
	Educational			
4.7 2	Dept of Ed / Navient Nonpriority Creditor's Name	Last 4 digits of account number	0329	\$3,112.00
	Po Box 9635 Wilkes Barre, PA 18773 Number Street City State Zip Code	When was the debt incurred?	Opened 03/17 Last Active 3/31/18	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	<input checked="" type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Contingent		
	<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Disputed		
	<input type="checkbox"/> At least one of the debtors and another			
	<input type="checkbox"/> Check if this claim is for a community debt	Type of NONPRIORITY unsecured claim:		
	<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Student loans		
	<input type="checkbox"/> Yes	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
		<input type="checkbox"/> Other. Specify _____		
	Educational			
4.7 3	Dept of Ed / Navient Nonpriority Creditor's Name	Last 4 digits of account number	0829	\$3,000.00
	Po Box 9635 Wilkes Barre, PA 18773 Number Street City State Zip Code	When was the debt incurred?	Opened 08/17 Last Active 3/31/18	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	<input checked="" type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Contingent		
	<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Disputed		
	<input type="checkbox"/> At least one of the debtors and another			
	<input type="checkbox"/> Check if this claim is for a community debt	Type of NONPRIORITY unsecured claim:		
	<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Student loans		
	<input type="checkbox"/> Yes	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
		<input type="checkbox"/> Other. Specify _____		
	Educational			

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.7 4	Dept of Ed / Navient <small>Nonpriority Creditor's Name</small> Po Box 9635 Wilkes Barre, PA 18773 <small>Number Street City State Zip Code</small> Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<small>Last 4 digits of account number</small> 0407 <small>When was the debt incurred?</small> Opened 04/16 Last Active 3/31/18 <small>As of the date you file, the claim is:</small> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____	\$2,170.00
Educational			
4.7 5	Dept of Ed / Navient <small>Nonpriority Creditor's Name</small> Po Box 9635 Wilkes Barre, PA 18773 <small>Number Street City State Zip Code</small> Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<small>Last 4 digits of account number</small> 0829 <small>When was the debt incurred?</small> Opened 08/17 Last Active 3/31/18 <small>As of the date you file, the claim is:</small> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____	\$2,027.00
Educational			
4.7 6	Dept of Ed / Navient <small>Nonpriority Creditor's Name</small> Po Box 9635 Wilkes Barre, PA 18773 <small>Number Street City State Zip Code</small> Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<small>Last 4 digits of account number</small> 0323 <small>When was the debt incurred?</small> Opened 03/16 Last Active 3/31/18 <small>As of the date you file, the claim is:</small> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____	\$2,000.00
Educational			

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.7
7

Dept of Ed / Navient Nonpriority Creditor's Name	Last 4 digits of account number	0912	\$1,894.00
Po Box 9635 Wilkes Barre, PA 18773	When was the debt incurred?	Opened 09/13 Last Active 10/26/16	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	<input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<input type="checkbox"/> Debtor 1 only	Type of NONPRIORITY unsecured claim:		
<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Other. Specify _____		
<input type="checkbox"/> At least one of the debtors and another			
<input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Educational

4.7
8

Dept of Ed / Navient Nonpriority Creditor's Name	Last 4 digits of account number	0912	\$1,175.00
Po Box 9635 Wilkes Barre, PA 18773	When was the debt incurred?	Opened 09/13 Last Active 10/26/16	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	<input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<input type="checkbox"/> Debtor 1 only	Type of NONPRIORITY unsecured claim:		
<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Other. Specify _____		
<input type="checkbox"/> At least one of the debtors and another			
<input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Educational

4.7
9

Dept of Ed / Navient Nonpriority Creditor's Name	Last 4 digits of account number	0329	\$518.00
Po Box 9635 Wilkes Barre, PA 18773	When was the debt incurred?	Opened 03/17 Last Active 3/31/18	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	<input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<input type="checkbox"/> Debtor 1 only	Type of NONPRIORITY unsecured claim:		
<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Other. Specify _____		
<input type="checkbox"/> At least one of the debtors and another			
<input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Educational

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.8 0	Dept of Ed / Navient Nonpriority Creditor's Name	Last 4 digits of account number	0829	\$500.00
Po Box 9635 Wilkes Barre, PA 18773		When was the debt incurred?	Opened 08/17 Last Active 3/31/18	
Number Street City State Zip Code				
Who incurred the debt? Check one.				
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another				
<input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____				
Educational				
4.8 1	Dept of Ed / Navient Nonpriority Creditor's Name	Last 4 digits of account number	0212	\$3,814.00
Po Box 9635 Wilkes Barre, PA 18773		When was the debt incurred?	Opened 02/13 Last Active 10/26/16	
Number Street City State Zip Code				
Who incurred the debt? Check one.				
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another				
<input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____				
Educational				
4.8 2	Dept of Ed / Navient Nonpriority Creditor's Name	Last 4 digits of account number	0329	\$3,215.00
Po Box 9635 Wilkes Barre, PA 18773		When was the debt incurred?	Opened 03/17 Last Active 2/28/19	
Number Street City State Zip Code				
Who incurred the debt? Check one.				
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another				
<input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____				
Educational				

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.8
3

Dept of Ed / Navient Nonpriority Creditor's Name	Last 4 digits of account number	0829	\$3,000.00
Po Box 9635 Wilkes Barre, PA 18773	When was the debt incurred?	Opened 08/17 Last Active 2/28/19	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	<input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<input type="checkbox"/> Debtor 1 only			
<input type="checkbox"/> Debtor 2 only			
<input type="checkbox"/> Debtor 1 and Debtor 2 only			
<input type="checkbox"/> At least one of the debtors and another			
<input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset?	<input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____		
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes			

Educational

4.8
4

Dept of Ed / Navient Nonpriority Creditor's Name	Last 4 digits of account number	0407	\$2,248.00
Po Box 9635 Wilkes Barre, PA 18773	When was the debt incurred?	Opened 04/16 Last Active 2/28/19	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	<input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<input type="checkbox"/> Debtor 1 only			
<input type="checkbox"/> Debtor 2 only			
<input type="checkbox"/> Debtor 1 and Debtor 2 only			
<input type="checkbox"/> At least one of the debtors and another			
<input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset?	<input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____		
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes			

Educational

4.8
5

Dept of Ed / Navient Nonpriority Creditor's Name	Last 4 digits of account number	0829	\$2,108.00
Po Box 9635 Wilkes Barre, PA 18773	When was the debt incurred?	Opened 08/17 Last Active 2/28/19	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	<input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<input type="checkbox"/> Debtor 1 only			
<input type="checkbox"/> Debtor 2 only			
<input type="checkbox"/> Debtor 1 and Debtor 2 only			
<input type="checkbox"/> At least one of the debtors and another			
<input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset?	<input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____		
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes			

Educational

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.8
6

Dept of Ed / Navient Nonpriority Creditor's Name	Last 4 digits of account number	0323	\$2,000.00
Po Box 9635 Wilkes Barre, PA 18773	When was the debt incurred?	Opened 03/16 Last Active 2/28/19	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	<input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<input type="checkbox"/> Debtor 1 only	Type of NONPRIORITY unsecured claim:		
<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Other. Specify _____		
<input type="checkbox"/> At least one of the debtors and another			
<input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	Educational		

4.8
7

Dept of Ed / Navient Nonpriority Creditor's Name	Last 4 digits of account number	0912	\$1,931.00
Po Box 9635 Wilkes Barre, PA 18773	When was the debt incurred?	Opened 09/13 Last Active 10/26/16	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	<input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<input type="checkbox"/> Debtor 1 only	Type of NONPRIORITY unsecured claim:		
<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Other. Specify _____		
<input type="checkbox"/> At least one of the debtors and another			
<input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	Educational		

4.8
8

Dept of Ed / Navient Nonpriority Creditor's Name	Last 4 digits of account number	0905	\$1,500.00
Po Box 9635 Wilkes Barre, PA 18773	When was the debt incurred?	Opened 09/18 Last Active 2/28/19	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	<input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<input type="checkbox"/> Debtor 1 only	Type of NONPRIORITY unsecured claim:		
<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Other. Specify _____		
<input type="checkbox"/> At least one of the debtors and another			
<input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	Educational		

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.8
9

Dept of Ed / Navient Nonpriority Creditor's Name	Last 4 digits of account number	0912	\$1,215.00
Po Box 9635 Wilkes Barre, PA 18773	When was the debt incurred?	Opened 09/13 Last Active 10/26/16	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	<input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<input type="checkbox"/> Debtor 1 only	Type of NONPRIORITY unsecured claim:		
<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Other. Specify _____		
<input type="checkbox"/> At least one of the debtors and another			
<input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	Educational		

4.9
0

Dept of Ed / Navient Nonpriority Creditor's Name	Last 4 digits of account number	0329	\$535.00
Po Box 9635 Wilkes Barre, PA 18773	When was the debt incurred?	Opened 03/17 Last Active 2/28/19	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	<input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<input type="checkbox"/> Debtor 1 only	Type of NONPRIORITY unsecured claim:		
<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Other. Specify _____		
<input type="checkbox"/> At least one of the debtors and another			
<input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	Educational		

4.9
1

Dept of Ed / Navient Nonpriority Creditor's Name	Last 4 digits of account number	0829	\$500.00
Po Box 9635 Wilkes Barre, PA 18773	When was the debt incurred?	Opened 08/17 Last Active 2/28/19	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	<input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<input type="checkbox"/> Debtor 1 only	Type of NONPRIORITY unsecured claim:		
<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Other. Specify _____		
<input type="checkbox"/> At least one of the debtors and another			
<input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	Educational		

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.9 2	Dept of Ed / Navient Nonpriority Creditor's Name	Last 4 digits of account number	0905	\$332.00
	Po Box 9635 Wilkes Barre, PA 18773 Number Street City State Zip Code	When was the debt incurred?	Opened 09/18 Last Active 2/28/19	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	<input checked="" type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Contingent		
	<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Disputed		
	<input type="checkbox"/> At least one of the debtors and another			
	<input type="checkbox"/> Check if this claim is for a community debt	Type of NONPRIORITY unsecured claim:		
	<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Student loans		
	<input type="checkbox"/> Yes	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
		<input type="checkbox"/> Other. Specify _____		

Educational

4.9 3	Dept of Ed / Navient Nonpriority Creditor's Name	Last 4 digits of account number	0905	\$136.00
	Po Box 9635 Wilkes Barre, PA 18773 Number Street City State Zip Code	When was the debt incurred?	Opened 09/18 Last Active 2/28/19	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	<input checked="" type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Contingent		
	<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Disputed		
	<input type="checkbox"/> At least one of the debtors and another			
	<input type="checkbox"/> Check if this claim is for a community debt	Type of NONPRIORITY unsecured claim:		
	<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Student loans		
	<input type="checkbox"/> Yes	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
		<input type="checkbox"/> Other. Specify _____		

Educational

4.9 4	Direct TV / AT&T Nonpriority Creditor's Name	Last 4 digits of account number	Unknown	
	c/o Bankruptcy 4331 Communications Dr., Floor 4W Dallas, TX 75211 Number Street City State Zip Code	When was the debt incurred?		
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Contingent		
	<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Unliquidated		
	<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Disputed		
	<input type="checkbox"/> At least one of the debtors and another			
	<input type="checkbox"/> Check if this claim is for a community debt	Type of NONPRIORITY unsecured claim:		
	<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Student loans		
	<input type="checkbox"/> Yes	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
		<input type="checkbox"/> Other. Specify _____		

Debtor 1 **Aaron Drew Glen Withrow**
Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.9 5	Fingerhut Nonpriority Creditor's Name	Last 4 digits of account number 9694	\$594.00
	6250 Ridgewood Road Saint Cloud, MN 56303 Number Street City State Zip Code	When was the debt incurred? Opened 02/17 Last Active 9/22/17	
	Who incurred the debt? Check one.		
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Other. Specify Charge Account		
	Is the claim subject to offset?		
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Student loans <input type="checkbox"/> Yes <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Yes <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Charge Account		
4.9 6	First National Credit Card/Legacy Nonpriority Creditor's Name	Last 4 digits of account number 4201	\$479.00
	500 East 60th St North Sioux Falls, SD 57104 Number Street City State Zip Code	When was the debt incurred? Opened 02/17 Last Active 11/17/17	
	Who incurred the debt? Check one.		
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <input checked="" type="checkbox"/> Other. Specify Credit Card		
	Is the claim subject to offset?		
	<input type="checkbox"/> No <input type="checkbox"/> Student loans <input type="checkbox"/> Yes <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Yes <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card		
4.9 7	First Premier Bank Nonpriority Creditor's Name	Last 4 digits of account number 5859	\$421.00
	601 S Minnesota Ave Sioux Falls, SD 57104 Number Street City State Zip Code	When was the debt incurred? Opened 08/17 Last Active 11/29/17	
	Who incurred the debt? Check one.		
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <input checked="" type="checkbox"/> Other. Specify Credit Card		
	Is the claim subject to offset?		
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Student loans <input type="checkbox"/> Yes <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Yes <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card		

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.9 8	First Saving Bank / Blaze Nonpriority Creditor's Name	Last 4 digits of account number	9944	\$1,386.00
	5501 S Broadband Ln Sioux Falls, SD 57108 Number Street City State Zip Code	When was the debt incurred?	Opened 07/17 Last Active 4/18/18	
	As of the date you file, the claim is: Check all that apply			
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Other. Specify Credit Card			
	Type of NONPRIORITY unsecured claim:			
	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts			
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.9 9	First Saving Bank / Blaze Nonpriority Creditor's Name	Last 4 digits of account number	9944	\$1,672.00
	500 E. 60th Street Sioux Falls, SD 57104 Number Street City State Zip Code	When was the debt incurred?	Opened 07/17 Last Active 4/18/18	
	As of the date you file, the claim is: Check all that apply			
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Other. Specify Credit Card			
	Type of NONPRIORITY unsecured claim:			
	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts			
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.1 00	First Source Advantage Nonpriority Creditor's Name	Last 4 digits of account number	Unknown	
	205 Bryant Woods South Buffalo, NY 14228 Number Street City State Zip Code	When was the debt incurred?		
	As of the date you file, the claim is: Check all that apply			
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Other. Specify Synchrony Bank			
	Type of NONPRIORITY unsecured claim:			
	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts			
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.1 01	Flex Shopper.com Nonpriority Creditor's Name Attn.: Legal Dept. 27 North Military Trail, Suite 200 Boca Raton, FL 33431 Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____	\$420.00
4.1 02	Fm/keybank Nonpriority Creditor's Name 121 S 13th St Ste 201 Lincoln, NE 68508 Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number 4304 When was the debt incurred? Opened 08/06 Last Active 2/28/19 As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____	\$9,156.00
Educational			
4.1 03	Fm/keybank Nonpriority Creditor's Name 121 S 13th St Ste 201 Lincoln, NE 68508 Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number 4286 When was the debt incurred? Opened 01/07 Last Active 2/28/19 As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____	\$1,215.00
Educational			

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">4.1 04</div> <p>Glelsi/key Education R Nonpriority Creditor's Name</p> <p>2401 International Lane Madison, WI 53704</p> <p>Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input checked="" type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number 0000</p> <p>When was the debt incurred? Opened 08/06 Last Active 9/21/16</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input checked="" type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input type="checkbox"/> Other. Specify _____</p>	\$10,075.00
Educational		
<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">4.1 05</div> <p>GM Financial Nonpriority Creditor's Name</p> <p>P. O. Box 181145 Arlington, TX 76096</p> <p>Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number</p> <p>When was the debt incurred?</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify _____</p>	Unknown
Halstead Financial		
<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">4.1 06</div> <p>Nonpriority Creditor's Name</p> <p>P. O. Box 828 Skokie, IL 60076</p> <p>Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number</p> <p>When was the debt incurred?</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify Collections for Credit one Bank</p>	Unknown

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.1
07

Healthcare Financial S	Last 4 digits of account number 0206	\$609.00
Nonpriority Creditor's Name 1204 Kanawha Blvd E Charleston, WV 25301	When was the debt incurred? Opened 9/26/17	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
	Collection Attorney Charleston Area Med Cntr Cerne	

4.1
08

Healthcare Financial S	Last 4 digits of account number 0206	\$609.00
Nonpriority Creditor's Name 1204 Kanawha Bv E Charleston, WV 25338	When was the debt incurred? Opened 09/17	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
	Collection Attorney Charleston Area Med Cntr Cerne	

4.1
09

Ibo/credit	Last 4 digits of account number 8078	\$122.00
Nonpriority Creditor's Name 1100 Charles Ave Suite 200 Dunbar, WV 25064	When was the debt incurred? Opened 2/01/17	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
	Radiology Inc	

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.1
10

IBO/Credit Services Nonpriority Creditor's Name 1100 Charles Ave Suite 200 Dunbar, WV 25064	Last 4 digits of account number 8078	\$122.00
Number Street City State Zip Code	When was the debt incurred? Opened 2/01/17	
As of the date you file, the claim is: Check all that apply		
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify Radiology Inc <input type="checkbox"/> Yes		

4.1
11

ITT Technical Nonpriority Creditor's Name Faegre Baker Daniels, LLP 600 East 96th St., Suite 600 Indianapolis, IN 46240	Last 4 digits of account number	Unknown
Number Street City State Zip Code	When was the debt incurred?	
As of the date you file, the claim is: Check all that apply		
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify _____ <input type="checkbox"/> Yes		

4.1
12

Key Bank First Mark Services Nonpriority Creditor's Name P. O. Box 2977 Omaha, NE 68103	Last 4 digits of account number	\$10,370.00
Number Street City State Zip Code	When was the debt incurred?	
As of the date you file, the claim is: Check all that apply		
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify _____ <input type="checkbox"/> Yes		

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.1 13	<p>Kings Daughters Medical Center Nonpriority Creditor's Name 2201 Lexington Ave. Ashland, KY 41101 Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify _____</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number _____ Unknown</p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify _____</p>
4.1 14	<p>Leroys Jewelers Nonpriority Creditor's Name 375 Ghent Rd Fairlawn, OH 44333 Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify Charge Account</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number 3644 Unknown</p> <p>When was the debt incurred? Opened 12/11 Last Active 2/16/12</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p>
4.1 15	<p>Leroys Jewelers Nonpriority Creditor's Name 375 Ghent Rd Fairlawn, OH 44333 Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify Charge Account</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number 2839 Unknown</p> <p>When was the debt incurred? Opened 12/23/11 Last Active 2/23/12</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p>

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.1 16	LVNV Funding/Resurgent Capital Nonpriority Creditor's Name C/o Resurgent Capital Services Greenville, SC 29602 Number Street City State Zip Code	Last 4 digits of account number 5549	\$3,037.00
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts			
Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Other. Specify Factoring Company Account Credit One Bank N.A.			
4.1 17	LVNV Funding/Resurgent Capital Nonpriority Creditor's Name C/o Resurgent Capital Services Greenville, SC 29602 Number Street City State Zip Code	Last 4 digits of account number 9736	\$998.00
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts			
Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Other. Specify Factoring Company Account Credit One Bank N.A.			
4.1 18	LVNV Funding/Resurgent Capital Nonpriority Creditor's Name C/o Resurgent Capital Services Greenville, SC 29602 Number Street City State Zip Code	Last 4 digits of account number 2311	\$862.00
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts			
Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Other. Specify Factoring Company Account Credit One Bank N.A.			

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.1
19**Marshall health**

Nonpriority Creditor's Name

**1600 Medical Center Sr.
Huntington, WV 25701**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only Contingent
 Debtor 2 only Unliquidated
 Debtor 1 and Debtor 2 only Disputed
 At least one of the debtors and another
 Check if this claim is for a community debt
Is the claim subject to offset?
 No Other. Specify _____
 Yes

Last 4 digits of account number _____

Unknown

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- Debtor 1 only Contingent
 Debtor 2 only Unliquidated
 Debtor 1 and Debtor 2 only Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify _____

4.1
20**Medtronic**

Nonpriority Creditor's Name

**13019 Collections Center Dr.
Chicago, IL 60693**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only Contingent
 Debtor 2 only Unliquidated
 Debtor 1 and Debtor 2 only Disputed
 At least one of the debtors and another
 Check if this claim is for a community debt
Is the claim subject to offset?
 No Other. Specify _____
 Yes

Last 4 digits of account number _____

Unknown

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- Debtor 1 only Contingent
 Debtor 2 only Unliquidated
 Debtor 1 and Debtor 2 only Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify _____

4.1
21**Merrick Bank/CardWorks**

Nonpriority Creditor's Name

**Pob 9201
Old Bethpage, NY 11804**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only Contingent
 Debtor 2 only Unliquidated
 Debtor 1 and Debtor 2 only Disputed
 At least one of the debtors and another
 Check if this claim is for a community debt
Is the claim subject to offset?
 No Other. Specify _____
 Yes

Last 4 digits of account number **6648****\$1,877.00****Opened 11/12 Last Active****4/15/18**

As of the date you file, the claim is: Check all that apply

- Debtor 1 only Contingent
 Debtor 2 only Unliquidated
 Debtor 1 and Debtor 2 only Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **Credit Card** _____

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.1 22	Merrick Bank/CardWorks Nonpriority Creditor's Name	Last 4 digits of account number 1575	\$1,298.00
Po Box 9201 Old Bethpage, NY 11804 Number Street City State Zip Code		When was the debt incurred? Opened 07/17 Last Active 1/26/18	
Who incurred the debt? Check one.			
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Other. Specify Credit Card			
As of the date you file, the claim is: Check all that apply			
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts			
Is the claim subject to offset?			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
Merrick Bank/CardWorks Nonpriority Creditor's Name		Last 4 digits of account number 6648	\$2,375.00
Po Box 9201 Old Bethpage, NY 11804 Number Street City State Zip Code		When was the debt incurred? Opened 11/12 Last Active 4/15/18	
Who incurred the debt? Check one.			
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Other. Specify Credit Card			
As of the date you file, the claim is: Check all that apply			
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts			
Merrick Bank/CardWorks Nonpriority Creditor's Name		Last 4 digits of account number 1575	\$1,547.00
Po Box 9201 Old Bethpage, NY 11804 Number Street City State Zip Code		When was the debt incurred? Opened 07/17 Last Active 1/26/18	
Who incurred the debt? Check one.			
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Other. Specify Credit Card			
As of the date you file, the claim is: Check all that apply			
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts			
Is the claim subject to offset?			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.1 25	Midland Credit Management Nonpriority Creditor's Name P. O. Box 301030 Los Angeles, CA 90030 Number Street City State Zip Code	Last 4 digits of account number _____	\$4,500.00
<p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify Collections for Ebay Mastercard</p> <p><input type="checkbox"/> Yes</p>			
<p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p>			
<p>As of the date you file, the claim is: Check all that apply</p>			
4.1 26	Monterey Col Nonpriority Creditor's Name 4095 Avenida De La Plata Oceanside, CA 92056 Number Street City State Zip Code	Last 4 digits of account number 6340	\$350.00
<p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify Collection Attorney Medtronic</p> <p><input type="checkbox"/> Yes</p>			
<p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p>			
<p>As of the date you file, the claim is: Check all that apply</p>			
4.1 27	Monterey Col Nonpriority Creditor's Name 4095 Avenida De La Playa Oceanside, CA 92056 Number Street City State Zip Code	Last 4 digits of account number 6340	\$350.00
<p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify Collection Attorney Medtronic</p> <p><input type="checkbox"/> Yes</p>			
<p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p>			
<p>As of the date you file, the claim is: Check all that apply</p>			

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.1
28**Mountwest Community & Tech**

Nonpriority Creditor's Name

**One Mountwest Way
Huntington, WV 25701**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only Contingent
 Debtor 2 only Unliquidated
 Debtor 1 and Debtor 2 only Disputed
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No Other. Specify _____
 Yes

Last 4 digits of account number _____

\$1,163.00

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- Debtor 1 only Contingent
 Debtor 2 only Unliquidated
 Debtor 1 and Debtor 2 only Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify _____

4.1
29**MRS Associates**

Nonpriority Creditor's Name

**3 Executive Campus, Suite 400
Cherry Hill, NJ 08002-4103**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only Contingent
 Debtor 2 only Unliquidated
 Debtor 1 and Debtor 2 only Disputed
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No Other. Specify _____
 Yes

Last 4 digits of account number _____

\$1,400.00

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- Debtor 1 only Contingent
 Debtor 2 only Unliquidated
 Debtor 1 and Debtor 2 only Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify _____

4.1
30**Nationwide Insurance**

Nonpriority Creditor's Name

**Credit Collection Services
725 Canton St.
Norwood, MA 02062**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only Contingent
 Debtor 2 only Unliquidated
 Debtor 1 and Debtor 2 only Disputed
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No Other. Specify _____
 Yes

Last 4 digits of account number _____

\$100.00

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- Debtor 1 only Contingent
 Debtor 2 only Unliquidated
 Debtor 1 and Debtor 2 only Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify _____

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.1
31**NorthStar Anethstesia**

Nonpriority Creditor's Name

**P. O. Box 610831
Dallas, TX 75261-0831**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only Contingent
 Debtor 2 only Unliquidated
 Debtor 1 and Debtor 2 only Disputed
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No Other. Specify _____
 Yes

Last 4 digits of account number _____**\$40.00****When was the debt incurred?** _____**As of the date you file, the claim is:** Check all that apply

- Debtor 1 only Contingent
 Debtor 2 only Unliquidated
 Debtor 1 and Debtor 2 only Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify _____

4.1
32**Portfolio Recovery Associates**

Nonpriority Creditor's Name

**P. O. Box 12914
Norfolk, VA 23541**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only Contingent
 Debtor 2 only Unliquidated
 Debtor 1 and Debtor 2 only Disputed
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No Other. Specify _____
 Yes

Last 4 digits of account number _____**\$1,400.00****When was the debt incurred?** _____**As of the date you file, the claim is:** Check all that apply

- Debtor 1 only Contingent
 Debtor 2 only Unliquidated
 Debtor 1 and Debtor 2 only Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify _____

4.1
33**Progressive Leasing**

Nonpriority Creditor's Name

**256 West Data Drive
Draper, UT 84020**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only Contingent
 Debtor 2 only Unliquidated
 Debtor 1 and Debtor 2 only Disputed
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No Other. Specify _____
 Yes

Last 4 digits of account number _____**\$836.00****When was the debt incurred?** _____**As of the date you file, the claim is:** Check all that apply

- Debtor 1 only Contingent
 Debtor 2 only Unliquidated
 Debtor 1 and Debtor 2 only Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify _____

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.1
34**Radiology Inc.**

Nonpriority Creditor's Name

**P. O. Box 910
Huntington, WV 25712-0910**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only Contingent
 Debtor 2 only Unliquidated
 Debtor 1 and Debtor 2 only Disputed
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No Debts to pension or profit-sharing plans, and other similar debts
 Yes Other. Specify _____

Last 4 digits of account number _____**\$100.00****When was the debt incurred?** _____**As of the date you file, the claim is:** Check all that apply

- Debtor 1 only Contingent
 Debtor 2 only Unliquidated
 Debtor 1 and Debtor 2 only Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

Other. Specify _____4.1
35**RGS Financial**

Nonpriority Creditor's Name

**P.O. Box 852039
Richardson, TX 75085-2039**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only Contingent
 Debtor 2 only Unliquidated
 Debtor 1 and Debtor 2 only Disputed
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No Debts to pension or profit-sharing plans, and other similar debts
 Yes Other. Specify **Legacy Visa**

Last 4 digits of account number _____**Unknown****When was the debt incurred?** _____**As of the date you file, the claim is:** Check all that apply

- Debtor 1 only Contingent
 Debtor 2 only Unliquidated
 Debtor 1 and Debtor 2 only Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

Other. Specify _____4.1
36**Second Round**

Nonpriority Creditor's Name

**P. O. Box 41955
Austin, TX 78704**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only Contingent
 Debtor 2 only Unliquidated
 Debtor 1 and Debtor 2 only Disputed
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No Debts to pension or profit-sharing plans, and other similar debts
 Yes Other. Specify _____

Last 4 digits of account number _____**\$3,500.00****When was the debt incurred?** _____**As of the date you file, the claim is:** Check all that apply

- Debtor 1 only Contingent
 Debtor 2 only Unliquidated
 Debtor 1 and Debtor 2 only Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

Other. Specify _____

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.1
37

Second Round, LP	Last 4 digits of account number	0126	\$3,446.00
Nonpriority Creditor's Name 4150 Freidrich Lane Austin, TX 78744	When was the debt incurred?	Opened 12/18	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify Collection Attorney Synchrony Bank <input type="checkbox"/> Yes		

4.1
38

SMMC	Last 4 digits of account number	Unknown
Nonpriority Creditor's Name 2900 1st Ave. Huntington, WV 25701	When was the debt incurred?	_____
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify _____ <input type="checkbox"/> Yes	

4.1
39

Sterling Jewelers, Inc.	Last 4 digits of account number	3644	Unknown
Nonpriority Creditor's Name 375 Ghent Rd Fairlawn, OH 44333	When was the debt incurred?	Opened 12/11 Last Active 2/16/12	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify Charge Account <input type="checkbox"/> Yes		

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.1 40	Stoneleigh Recovery Associates Nonpriority Creditor's Name PO BOX 1118 Charlotte, NC 28201-1180 Number Street City State Zip Code	Last 4 digits of account number _____	Unknown
	Who incurred the debt? Check one.	When was the debt incurred? _____	
	<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Unliquidated	
	<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Disputed	
	<input type="checkbox"/> At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	<input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Student loans	
	Is the claim subject to offset?	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> Other. Specify Capital One _____	
4.1 41	Synchrony Bank/ Old Navy Nonpriority Creditor's Name Po Box 965005 Orlando, FL 32896 Number Street City State Zip Code	Last 4 digits of account number 0126	\$2,696.00
	Who incurred the debt? Check one.	When was the debt incurred? Opened 11/09 Last Active 4/24/18	
	<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Contingent	
	<input checked="" type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Disputed	
	<input type="checkbox"/> At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	<input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Student loans	
	Is the claim subject to offset?	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> Other. Specify Charge Account _____	
4.1 42	Synchrony Bank/Gap Nonpriority Creditor's Name Po Box 965005 Orlando, FL 32896 Number Street City State Zip Code	Last 4 digits of account number 8745	\$274.00
	Who incurred the debt? Check one.	When was the debt incurred? Opened 09/17 Last Active 4/08/18	
	<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Unliquidated	
	<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Disputed	
	<input type="checkbox"/> At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	<input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Student loans	
	Is the claim subject to offset?	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> Other. Specify Credit Card _____	

Debtor 1 **Aaron Drew Glen Withrow**
Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.1 43	Synchrony Bank/Gap Nonpriority Creditor's Name	Last 4 digits of account number 8745	Unknown
	Po Box 965005 Orlando, FL 32896 Number Street City State Zip Code	When was the debt incurred? Opened 09/17 Last Active 4/07/18	
	Who incurred the debt? Check one.		
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent		
	<input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed		
	<input type="checkbox"/> At least one of the debtors and another		
	<input type="checkbox"/> Check if this claim is for a community debt		
	Is the claim subject to offset?		
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify Credit Card		
<input type="checkbox"/> Yes			
4.1 44	Synchrony Bank/Lowes Nonpriority Creditor's Name	Last 4 digits of account number 3380	\$455.00
	Po Box 965005 Orlando, FL 32896 Number Street City State Zip Code	When was the debt incurred? Opened 11/15 Last Active 4/05/18	
	Who incurred the debt? Check one.		
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent		
	<input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated		
	<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed		
	<input type="checkbox"/> At least one of the debtors and another		
	<input type="checkbox"/> Check if this claim is for a community debt		
	Is the claim subject to offset?		
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify Charge Account		
<input type="checkbox"/> Yes			
4.1 45	Synchrony Bank/Lowes Nonpriority Creditor's Name	Last 4 digits of account number 3380	\$800.00
	Po Box 956005 Orlando, FL 32896 Number Street City State Zip Code	When was the debt incurred? Opened 11/15 Last Active 4/04/18	
	Who incurred the debt? Check one.		
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent		
	<input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed		
	<input type="checkbox"/> At least one of the debtors and another		
	<input type="checkbox"/> Check if this claim is for a community debt		
	Is the claim subject to offset?		
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify Charge Account		
<input type="checkbox"/> Yes			

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.1
46

Synchrony Bank/Sams Nonpriority Creditor's Name	Last 4 digits of account number	9891	\$1,036.00
Po Box 965005 Orlando, FL 32896 Number Street City State Zip Code	When was the debt incurred?	Opened 02/13 Last Active 4/08/18	
As of the date you file, the claim is: Check all that apply			
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Other. Specify Charge Account			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

4.1
47

Synchrony Bank/Sams Nonpriority Creditor's Name	Last 4 digits of account number	5078	Unknown
Po Box 965005 Orlando, FL 32896 Number Street City State Zip Code	When was the debt incurred?	Opened 2/21/13 Last Active 8/01/16	
As of the date you file, the claim is: Check all that apply			
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Other. Specify Charge Account			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

4.1
48

Synchrony Bank/Sams Nonpriority Creditor's Name	Last 4 digits of account number	9891	\$1,505.00
Po Box 965005 Orlando, FL 32896 Number Street City State Zip Code	When was the debt incurred?	Opened 02/13 Last Active 4/06/18	
As of the date you file, the claim is: Check all that apply			
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Other. Specify Charge Account			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.1 49	<p>Synchrony Bank/Sams <small>Nonpriority Creditor's Name</small></p> <p>Po Box 965005 Orlando, FL 32896 <small>Number Street City State Zip Code</small></p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input checked="" type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>2069</u></p> <p>When was the debt incurred? <u>Opened 2/21/13 Last Active 8/01/16</u></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Charge Account</u></p>	<p>Unknown</p>
4.1 50	<p>Synchrony Bank/Walmart <small>Nonpriority Creditor's Name</small></p> <p>Po Box 965024 Orlando, FL 32896 <small>Number Street City State Zip Code</small></p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input checked="" type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>9290</u></p> <p>When was the debt incurred? <u>Opened 11/09 Last Active 4/06/18</u></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Charge Account</u></p>	<p>\$2,996.00</p>
4.1 51	<p>Synchrony Bank/Walmart <small>Nonpriority Creditor's Name</small></p> <p>Po Box 965024 Orlando, FL 32896 <small>Number Street City State Zip Code</small></p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input checked="" type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>9290</u></p> <p>When was the debt incurred? <u>Opened 11/09 Last Active 4/05/18</u></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Charge Account</u></p>	<p>Unknown</p>

Debtor 1 **Aaron Drew Glen Withrow**
Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.1 52	The Bureaus Inc Nonpriority Creditor's Name 1717 Central St Evanston, IL 60201 Number Street City State Zip Code	Last 4 digits of account number 4625	\$670.00
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Other. Specify Collection Attorney Capital One National Associat			
As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts			
Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

4.1 53	The Bureaus Inc Nonpriority Creditor's Name 1717 Central St Evanston, IL 60201 Number Street City State Zip Code	Last 4 digits of account number 5029	\$500.00
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Other. Specify Collection Attorney Capital One Bank Usa Nation			
As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts			
Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

4.1 54	Tnb-Visa (TV) / Target Nonpriority Creditor's Name Po Box 673 Minneapolis, MN 55440 Number Street City State Zip Code	Last 4 digits of account number 2305	\$3,888.00
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Other. Specify Credit Card			
As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts			
Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.1 55	Tnb-Visa (TV) / Target Nonpriority Creditor's Name	Last 4 digits of account number 2305	\$4,767.00
	Po Box 673 Minneapolis, MN 55440 Number Street City State Zip Code	When was the debt incurred? Opened 06/14 Last Active 4/07/18	
	Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card	
4.1 56	TSI/Transworld Systems Inc. Nonpriority Creditor's Name 500 Virginia Dr Ste 514 Ft Washington, PA 19034 Number Street City State Zip Code	Last 4 digits of account number 4669	\$935.00
	Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	When was the debt incurred? Opened 07/17	
		As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Collection Attorney Cabell Huntington Hospital	
4.1 57	TSI/Transworld Systems Inc. Nonpriority Creditor's Name 500 Virginia Dr Ste 514 Ft Washington, PA 19034 Number Street City State Zip Code	Last 4 digits of account number 0057	\$639.00
	Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	When was the debt incurred? Opened 03/17	
		As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Collection Attorney Cabell Huntington Hospital	

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.1 58	TSI/Transworld Systems Inc. Nonpriority Creditor's Name 500 Virginia Dr Ste 514 Ft Washington, PA 19034 Number Street City State Zip Code	Last 4 digits of account number 5928	\$474.00
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
When was the debt incurred? Opened 06/17			
As of the date you file, the claim is: Check all that apply			
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts			
<input type="checkbox"/> Other. Specify Collection Attorney Cabell Huntington Hospital			
4.1 59	TSI/Transworld Systems Inc. Nonpriority Creditor's Name 500 Virginia Dr Ste 514 Ft Washington, PA 19034 Number Street City State Zip Code	Last 4 digits of account number 4763	\$65.00
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
When was the debt incurred? Opened 07/17			
As of the date you file, the claim is: Check all that apply			
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts			
<input type="checkbox"/> Other. Specify Collection Attorney Cabell Huntington Hospital			
4.1 60	TSI/Transworld Systems Inc. Nonpriority Creditor's Name Pob 15270 Wilmington, DE 19850 Number Street City State Zip Code	Last 4 digits of account number 1747	\$980.00
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
When was the debt incurred? Opened 02/18			
As of the date you file, the claim is: Check all that apply			
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts			
<input type="checkbox"/> Other. Specify Collection Attorney Cabell Huntington Hospital			

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.1 61	TSI/Transworld Systems Inc. Nonpriority Creditor's Name Pob 15270 Wilmington, DE 19850	Last 4 digits of account number 4669	\$935.00
When was the debt incurred? Opened 07/17			
As of the date you file, the claim is: Check all that apply			
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt 			
Type of NONPRIORITY unsecured claim:			
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts			
Is the claim subject to offset?			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Collection Attorney Cabell Huntington Hospital			
4.1 62	TSI/Transworld Systems Inc. Nonpriority Creditor's Name Pob 15270 Wilmington, DE 19850	Last 4 digits of account number 7032	\$724.00
When was the debt incurred? Opened 05/18			
As of the date you file, the claim is: Check all that apply			
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt 			
Type of NONPRIORITY unsecured claim:			
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts			
Is the claim subject to offset?			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Collection Attorney Cabell Huntington Hospital			
4.1 63	TSI/Transworld Systems Inc. Nonpriority Creditor's Name Pob 15270 Wilmington, DE 19850	Last 4 digits of account number 0057	\$639.00
When was the debt incurred? Opened 03/17			
As of the date you file, the claim is: Check all that apply			
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt 			
Type of NONPRIORITY unsecured claim:			
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts			
Is the claim subject to offset?			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Collection Attorney Cabell Huntington Hospital			

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.1 64	TSI/Transworld Systems Inc. Nonpriority Creditor's Name Pob 15270 Wilmington, DE 19850	Last 4 digits of account number 5928	\$474.00																
<p>When was the debt incurred? Opened 06/17</p> <p>As of the date you file, the claim is: Check all that apply</p> <table> <tr> <td><input checked="" type="checkbox"/> Debtor 1 only</td> <td><input type="checkbox"/> Contingent</td> </tr> <tr> <td><input type="checkbox"/> Debtor 2 only</td> <td><input type="checkbox"/> Unliquidated</td> </tr> <tr> <td><input type="checkbox"/> Debtor 1 and Debtor 2 only</td> <td><input type="checkbox"/> Disputed</td> </tr> <tr> <td><input type="checkbox"/> At least one of the debtors and another</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Check if this claim is for a community debt</td> <td>Type of NONPRIORITY unsecured claim:</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Student loans</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</td> </tr> </table> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>Collection Attorney Cabell Huntington Hospital</p> <p>■ Other. Specify _____</p>				<input checked="" type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Contingent	<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Unliquidated	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Disputed	<input type="checkbox"/> At least one of the debtors and another		<input type="checkbox"/> Check if this claim is for a community debt	Type of NONPRIORITY unsecured claim:		<input type="checkbox"/> Student loans		<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts
<input checked="" type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Contingent																		
<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Unliquidated																		
<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Disputed																		
<input type="checkbox"/> At least one of the debtors and another																			
<input type="checkbox"/> Check if this claim is for a community debt	Type of NONPRIORITY unsecured claim:																		
	<input type="checkbox"/> Student loans																		
	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims																		
	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts																		
4.1 65	TSI/Transworld Systems Inc. Nonpriority Creditor's Name Pob 15270 Wilmington, DE 19850	Last 4 digits of account number 8198	\$429.00																
<p>When was the debt incurred? Opened 03/18</p> <p>As of the date you file, the claim is: Check all that apply</p> <table> <tr> <td><input type="checkbox"/> Debtor 1 only</td> <td><input type="checkbox"/> Contingent</td> </tr> <tr> <td><input checked="" type="checkbox"/> Debtor 2 only</td> <td><input type="checkbox"/> Unliquidated</td> </tr> <tr> <td><input type="checkbox"/> Debtor 1 and Debtor 2 only</td> <td><input type="checkbox"/> Disputed</td> </tr> <tr> <td><input type="checkbox"/> At least one of the debtors and another</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Check if this claim is for a community debt</td> <td>Type of NONPRIORITY unsecured claim:</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Student loans</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</td> </tr> </table> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>Collection Attorney Cabell Huntington Hospital</p> <p>■ Other. Specify _____</p>				<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Contingent	<input checked="" type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Unliquidated	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Disputed	<input type="checkbox"/> At least one of the debtors and another		<input type="checkbox"/> Check if this claim is for a community debt	Type of NONPRIORITY unsecured claim:		<input type="checkbox"/> Student loans		<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts
<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Contingent																		
<input checked="" type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Unliquidated																		
<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Disputed																		
<input type="checkbox"/> At least one of the debtors and another																			
<input type="checkbox"/> Check if this claim is for a community debt	Type of NONPRIORITY unsecured claim:																		
	<input type="checkbox"/> Student loans																		
	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims																		
	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts																		
4.1 66	TSI/Transworld Systems Inc. Nonpriority Creditor's Name Pob 15270 Wilmington, DE 19850	Last 4 digits of account number 7833	\$275.00																
<p>When was the debt incurred? Opened 10/17</p> <p>As of the date you file, the claim is: Check all that apply</p> <table> <tr> <td><input type="checkbox"/> Debtor 1 only</td> <td><input type="checkbox"/> Contingent</td> </tr> <tr> <td><input checked="" type="checkbox"/> Debtor 2 only</td> <td><input type="checkbox"/> Unliquidated</td> </tr> <tr> <td><input type="checkbox"/> Debtor 1 and Debtor 2 only</td> <td><input type="checkbox"/> Disputed</td> </tr> <tr> <td><input type="checkbox"/> At least one of the debtors and another</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Check if this claim is for a community debt</td> <td>Type of NONPRIORITY unsecured claim:</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Student loans</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</td> </tr> </table> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>Collection Attorney Cabell Huntington Hospital</p> <p>■ Other. Specify _____</p>				<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Contingent	<input checked="" type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Unliquidated	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Disputed	<input type="checkbox"/> At least one of the debtors and another		<input type="checkbox"/> Check if this claim is for a community debt	Type of NONPRIORITY unsecured claim:		<input type="checkbox"/> Student loans		<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts
<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Contingent																		
<input checked="" type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Unliquidated																		
<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Disputed																		
<input type="checkbox"/> At least one of the debtors and another																			
<input type="checkbox"/> Check if this claim is for a community debt	Type of NONPRIORITY unsecured claim:																		
	<input type="checkbox"/> Student loans																		
	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims																		
	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts																		

**Debtor 1 Aaron Drew Glen Withrow
Debtor 2 Megan Inez Scites**

Case number (if known)

4.1 67	TSI/Transworld Systems Inc. Nonpriority Creditor's Name Pob 15270 Wilmington, DE 19850 Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number 7569 When was the debt incurred? Opened 02/18 As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	\$231.00
4.1 68	TSI/Transworld Systems Inc. Nonpriority Creditor's Name Pob 15270 Wilmington, DE 19850 Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number 7567 When was the debt incurred? Opened 11/17 As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	\$71.00
4.1 69	TSI/Transworld Systems Inc. Nonpriority Creditor's Name Pob 15270 Wilmington, DE 19850 Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number 4763 When was the debt incurred? Opened 07/17 As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	\$65.00

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.1
70

University Physicians & Surgeons Nonpriority Creditor's Name Surgery 1600 Medical Center Drive Huntington, WV 25701	Last 4 digits of account number _____	Unknown
Number Street City State Zip Code	When was the debt incurred? _____	
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Contingent	
<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Unliquidated	
<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Disputed	
<input type="checkbox"/> At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
<input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Student loans	
Is the claim subject to offset?	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
<input checked="" type="checkbox"/> No	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> Other. Specify _____	

4.1
71

US Dept of Education Nonpriority Creditor's Name Po Box 5609 Greenville, TX 75403	Last 4 digits of account number 8461	Unknown
Number Street City State Zip Code	When was the debt incurred? Opened 9/20/06 Last Active 9/30/11	
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Contingent	
<input checked="" type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Unliquidated	
<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Disputed	
<input type="checkbox"/> At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
<input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Student loans	
Is the claim subject to offset?	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
<input checked="" type="checkbox"/> No	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
<input type="checkbox"/> Yes	<input type="checkbox"/> Other. Specify _____	
Educational		

4.1
72

Valley Health Systems Nonpriority Creditor's Name 2585 3rd Ave. Huntington, WV 25703	Last 4 digits of account number _____	Unknown
Number Street City State Zip Code	When was the debt incurred? _____	
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Contingent	
<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Unliquidated	
<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Disputed	
<input type="checkbox"/> At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
<input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Student loans	
Is the claim subject to offset?	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
<input checked="" type="checkbox"/> No	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> Other. Specify _____	

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

4.1
73

Vanguard Financial Ser Nonpriority Creditor's Name 210 Brook St Ste 100 Charleston, WV 25301	Last 4 digits of account number 8303	\$130.00
Number Street City State Zip Code	When was the debt incurred? Opened 06/17	
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Contingent	
<input checked="" type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Unliquidated	
<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Disputed	
<input type="checkbox"/> At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
<input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Student loans	
<input type="checkbox"/> Is the claim subject to offset?	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
<input checked="" type="checkbox"/> No	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
<input type="checkbox"/> Yes	Collection Attorney St Mary S Medical Center <input checked="" type="checkbox"/> Other. Specify _____	

4.1
74

Vanguard Financial Ser Nonpriority Creditor's Name 210 Brook St Ste 100 Charleston, WV 25301	Last 4 digits of account number 8303	\$130.00
Number Street City State Zip Code	When was the debt incurred? Opened 06/17	
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Contingent	
<input checked="" type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Unliquidated	
<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Disputed	
<input type="checkbox"/> At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
<input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Student loans	
<input type="checkbox"/> Is the claim subject to offset?	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
<input checked="" type="checkbox"/> No	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
<input type="checkbox"/> Yes	Collection Attorney St Marys Medical Center <input checked="" type="checkbox"/> Other. Specify _____	

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address

Aes/pnc Bank
Attn: Bankruptcy Dept
Po Box 2461
Harrisburg, PA 17105

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.1 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Name and Address

Aes/pnc Bank
Attn: Bankruptcy Dept
Po Box 2461
Harrisburg, PA 17105

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.2 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Name and Address

Aes/pnc Bank
Attn: Bankruptcy Dept
Po Box 2461
Harrisburg, PA 17105

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.3 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

Name and Address
AmeriCredit/GM Financial
Attn: Bankruptcy
Po Box 183853
Arlington, TX 76096

On which entry in Part 1 or Part 2 did you list the original creditor?
 Line 4.4 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Capital One
Attn: Bankruptcy
Po Box 30285
Salt Lake City, UT 84130

On which entry in Part 1 or Part 2 did you list the original creditor?
 Line 4.9 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Capital One
Attn: Bankruptcy
Po Box 30285
Salt Lake City, UT 84130

On which entry in Part 1 or Part 2 did you list the original creditor?
 Line 4.10 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Capital One
Attn: Bankruptcy
Po Box 30285
Salt Lake City, UT 84130

On which entry in Part 1 or Part 2 did you list the original creditor?
 Line 4.11 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Capital One
Attn: Bankruptcy
Po Box 30285
Salt Lake City, UT 84130

On which entry in Part 1 or Part 2 did you list the original creditor?
 Line 4.12 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Capital One
Attn: Bankruptcy
Po Box 30285
Salt Lake City, UT 84130

On which entry in Part 1 or Part 2 did you list the original creditor?
 Line 4.13 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Capital One
Attn: Bankruptcy
Po Box 30285
Salt Lake City, UT 84130

On which entry in Part 1 or Part 2 did you list the original creditor?
 Line 4.14 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Capital One
Attn: Bankruptcy
Po Box 30285
Salt Lake City, UT 84130

On which entry in Part 1 or Part 2 did you list the original creditor?
 Line 4.15 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Capital One
Attn: Bankruptcy
Po Box 30285
Salt Lake City, UT 84130

On which entry in Part 1 or Part 2 did you list the original creditor?
 Line 4.16 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Chase Card Services
Correspondence Dept
Po Box 15298

On which entry in Part 1 or Part 2 did you list the original creditor?
 Line 4.18 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Debtor 1 **Aaron Drew Glen Withrow**
Debtor 2 **Megan Inez Scites**

Case number (if known) _____

Wilmington, DE 19850

Last 4 digits of account number

Name and Address
Chase Card Services
Correspondence Dept
Po Box 15298
Wilmington, DE 19850

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.19** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Name and Address
Chase Card Services
Attn: Bankruptcy
Po Box 15298
Wilmington, DE 19850

Last 4 digits of account number

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.20** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Name and Address
Chase Card Services
Attn: Bankruptcy
Po Box 15298
Wilmington, DE 19850

Last 4 digits of account number

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.21** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Name and Address
Citibank/The Home Depot
Centralized Bankruptcy
Po Box 790034
St Louis, MO 63179

Last 4 digits of account number

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.22** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Name and Address
Citibank/The Home Depot
Attn: Recovery/Centralized
Bankruptcy
Po Box 790034
St Louis, MO 63179

Last 4 digits of account number

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.23** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Name and Address
Comenity Bank/Dress Barn
Attn: Bankruptcy Dept
Po Box 182125
Columbus, OH 43218

Last 4 digits of account number

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.31** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Name and Address
Comenity Bank/Dress Barn
Attn: Bankruptcy
Po Box 182125
Columbus, OH 43218

Last 4 digits of account number

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.32** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Name and Address
Comenity Bank/Torrid
Attn: Bankruptcy Dept
Po Box 182125
Columbus, OH 43218

Last 4 digits of account number

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.33** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Name and Address
Comenity Bank/Torrid
Attn: Bankruptcy
Po Box 182125
Columbus, OH 43218

Last 4 digits of account number

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.34** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Name and Address
Comenity Bkl/Ulta

Last 4 digits of account number

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.35** of (Check one):

Debtor 1 **Aaron Drew Glen Withrow**
Debtor 2 **Megan Inez Scites**

Case number (if known) _____

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Attn: Bankruptcy Dept
Po Box 182125
Columbus, OH 43218

Last 4 digits of account number _____

Name and Address
Comenity Bkl/Uulta
Attn: Bankruptcy Dept
Po Box 182125
Columbus, OH 43218

On which entry in Part 1 or Part 2 did you list the original creditor?

- Line **4.36** of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Name and Address
Credit One Bank
Attn: Bankruptcy
Po Box 98873
Las Vegas, NV 89193

On which entry in Part 1 or Part 2 did you list the original creditor?

- Line **4.37** of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Name and Address
Credit One Bank
Attn: Bankruptcy
Po Box 98873
Las Vegas, NV 89193

Last 4 digits of account number _____

Name and Address
Credit One Bank
Attn: Bankruptcy
Po Box 98873
Las Vegas, NV 89193

On which entry in Part 1 or Part 2 did you list the original creditor?

- Line **4.39** of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Name and Address
Credit One Bank
Attn: Bankruptcy Department
Po Box 98873
Las Vegas, NV 89193

Last 4 digits of account number _____

Name and Address
Credit One Bank
Attn: Bankruptcy Department
Po Box 98873
Las Vegas, NV 89193

On which entry in Part 1 or Part 2 did you list the original creditor?

- Line **4.40** of (Check one): Part 1: Creditors with Priority Unsecured Claims

- Part 2: Creditors with Nonpriority Unsecured Claims

Name and Address
Credit One Bank
Attn: Bankruptcy Department
Po Box 98873
Las Vegas, NV 89193

Last 4 digits of account number _____

Name and Address
Debt Collection Partners
Wes Mon Building 2
11 Commerce Dr, Ste 208
Westover, WV 26501

On which entry in Part 1 or Part 2 did you list the original creditor?

- Line **4.44** of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Name and Address
Department of Education/Nelnet
Attn: Claims
Po Box 82505
Lincoln, NE 68501

Last 4 digits of account number _____

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor?

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

Department of Education/Nelnet
Attn: Claims
Po Box 82505
Lincoln, NE 68501

Line **4.46** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Department of Education/Nelnet
Attn: Claims
Po Box 82505
Lincoln, NE 68501

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.47** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Department of Education/Nelnet
Attn: Claims
Po Box 82505
Lincoln, NE 68501

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.48** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Department of Education/Nelnet
Attn: Claims
Po Box 82505
Lincoln, NE 68501

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.49** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Department of Education/Nelnet
Attn: Claims
Po Box 82505
Lincoln, NE 68501

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.50** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Department of Education/Nelnet
Attn: Claims
Po Box 82505
Lincoln, NE 68501

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.51** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Department of Education/Nelnet
Attn: Claims
Po Box 82505
Lincoln, NE 68501

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.52** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Department of Education/Nelnet
Attn: Claims
Po Box 82505
Lincoln, NE 68501

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.53** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Department of Education/Nelnet
Attn: Claims
Po Box 82505
Lincoln, NE 68501

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.54** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Department of Education/Nelnet
Attn: Claims
Po Box 82505
Lincoln, NE 68501

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.55** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Debtor 1 **Aaron Drew Glen Withrow**
Debtor 2 **Megan Inez Scites**

Case number (if known) _____

Name and Address

Department of Education/Nelnet
Attn: Claims
Po Box 82505
Lincoln, NE 68501

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.56** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Department of Education/Nelnet
Attn: Claims
Po Box 82505
Lincoln, NE 68501

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.57** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Dept of Ed / 582 / Nelnet
Attn: Claims
Po Box 82505
Lincoln, NE 68501

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.58** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Dept of Ed / 582 / Nelnet
Attn: Claims
Po Box 82505
Lincoln, NE 68501

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.59** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Dept of Ed / 582 / Nelnet
Attn: Claims
Po Box 82505
Lincoln, NE 68501

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.60** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Dept of Ed / 582 / Nelnet
Attn: Claims
Po Box 82505
Lincoln, NE 68501

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.61** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Dept of Ed / 582 / Nelnet
Attn: Claims
Po Box 82505
Lincoln, NE 68501

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.62** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Dept of Ed / 582 / Nelnet
Attn: Claims
Po Box 82505
Lincoln, NE 68501

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.63** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Dept of Ed / 582 / Nelnet
Attn: Claims
Po Box 82505
Lincoln, NE 68501

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.64** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Dept of Ed / 582 / Nelnet
Attn: Claims
Po Box 82505
Lincoln, NE 68501

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.65** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

Last 4 digits of account number

Name and Address

Dept of Ed / 582 / Nelnet
Attn: Claims
Po Box 82505
Lincoln, NE 68501

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.66** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Dept of Ed / 582 / Nelnet
Attn: Claims
Po Box 82505
Lincoln, NE 68501

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.67** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Dept of Ed / 582 / Nelnet
Attn: Claims
Po Box 82505
Lincoln, NE 68501

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.68** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Dept of Ed / 582 / Nelnet
Attn: Claims
Po Box 82505
Lincoln, NE 68501

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.69** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Dept of Ed / 582 / Nelnet
Attn: Claims
Po Box 82505
Lincoln, NE 68501

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.70** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Dept of Ed / Navient
Attn: Claims Dept
Po Box 9635
Wilkes Barr, PA 18773

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.71** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Dept of Ed / Navient
Attn: Claims Dept
Po Box 9635
Wilkes Barr, PA 18773

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.72** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Dept of Ed / Navient
Attn: Claims Dept
Po Box 9635
Wilkes Barr, PA 18773

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.73** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Dept of Ed / Navient
Attn: Claims Dept
Po Box 9635
Wilkes Barr, PA 18773

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.74** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Dept of Ed / Navient
Attn: Claims Dept
Po Box 9635

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.75** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Debtor 1 **Aaron Drew Glen Withrow**
Debtor 2 **Megan Inez Scites**

Case number (if known) _____

Wilkes Barr, PA 18773

Last 4 digits of account number

Name and Address
Dept of Ed / Navient
Attn: Claims Dept
Po Box 9635
Wilkes Barr, PA 18773

On which entry in Part 1 or Part 2 did you list the original creditor?

- Line **4.76** of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Dept of Ed / Navient
Attn: Claims Dept
Po Box 9635
Wilkes Barr, PA 18773

On which entry in Part 1 or Part 2 did you list the original creditor?

- Line **4.77** of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Dept of Ed / Navient
Attn: Claims Dept
Po Box 9635
Wilkes Barr, PA 18773

On which entry in Part 1 or Part 2 did you list the original creditor?

- Line **4.78** of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Dept of Ed / Navient
Attn: Claims Dept
Po Box 9635
Wilkes Barr, PA 18773

On which entry in Part 1 or Part 2 did you list the original creditor?

- Line **4.79** of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Dept of Ed / Navient
Attn: Claims Dept
Po Box 9635
Wilkes Barr, PA 18773

On which entry in Part 1 or Part 2 did you list the original creditor?

- Line **4.80** of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Dept of Ed / Navient
Attn: Claims Dept
Po Box 9635
Wilkes Barr, PA 18773

On which entry in Part 1 or Part 2 did you list the original creditor?

- Line **4.81** of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Dept of Ed / Navient
Attn: Claims Dept
Po Box 9635
Wilkes Barr, PA 18773

On which entry in Part 1 or Part 2 did you list the original creditor?

- Line **4.82** of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Dept of Ed / Navient
Attn: Claims Dept
Po Box 9635
Wilkes Barr, PA 18773

On which entry in Part 1 or Part 2 did you list the original creditor?

- Line **4.83** of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Dept of Ed / Navient
Attn: Claims Dept
Po Box 9635
Wilkes Barr, PA 18773

On which entry in Part 1 or Part 2 did you list the original creditor?

- Line **4.84** of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Dept of Ed / Navient
Attn: Claims Dept

On which entry in Part 1 or Part 2 did you list the original creditor?

- Line **4.85** of (Check one): Part 1: Creditors with Priority Unsecured Claims

Debtor 1 **Aaron Drew Glen Withrow**
Debtor 2 **Megan Inez Scites**

Case number (if known) _____

**Po Box 9635
Wilkes Barr, PA 18773** Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
**Dept of Ed / Navient
Attn: Claims Dept
Po Box 9635
Wilkes Barr, PA 18773**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.86** of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
**Dept of Ed / Navient
Attn: Claims Dept
Po Box 9635
Wilkes Barr, PA 18773**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.87** of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
**Dept of Ed / Navient
Attn: Claims Dept
Po Box 9635
Wilkes Barr, PA 18773**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.88** of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
**Dept of Ed / Navient
Attn: Claims Dept
Po Box 9635
Wilkes Barr, PA 18773**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.89** of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
**Dept of Ed / Navient
Attn: Claims Dept
Po Box 9635
Wilkes Barr, PA 18773**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.90** of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
**Dept of Ed / Navient
Attn: Claims Dept
Po Box 9635
Wilkes Barr, PA 18773**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.91** of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
**Dept of Ed / Navient
Attn: Claims Dept
Po Box 9635
Wilkes Barr, PA 18773**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.92** of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
**Dept of Ed / Navient
Attn: Claims Dept
Po Box 9635
Wilkes Barr, PA 18773**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.93** of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
**Fingerhut
Bankruptcy Dept
6250 Ridgewood Rd
Saint Cloud, MN 56303**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.95** of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
First National Credit Card/Legacy

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.96** of (Check one):

Debtor 1 **Aaron Drew Glen Withrow**
Debtor 2 **Megan Inez Scites**

Case number (if known) _____

First National Credit Card
Po Box 5097
Sioux Falls, SD 51117

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
First Saving Bank / Blaze
Attn: Bankruptcy
Po Box 5096
Sioux Falls, SD 57117

On which entry in Part 1 or Part 2 did you list the original creditor?

- Line **4.98** of (Check one):
 Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
First Saving Bank / Blaze
Attn: Bankruptcy
Po Box 5096
Sioux Falls, SD 57117

On which entry in Part 1 or Part 2 did you list the original creditor?

- Line **4.99** of (Check one):
 Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Healthcare Financial S
Attn: Bankruptcy
Po Box 3882
Charleston, WV 25338

On which entry in Part 1 or Part 2 did you list the original creditor?

- Line **4.107** of (Check one):
 Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Healthcare Financial S
Attn: Bankruptcy
Po Box 3882
Charleston, WV 25338

On which entry in Part 1 or Part 2 did you list the original creditor?

- Line **4.108** of (Check one):
 Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
IBO/Credit Services
Attn: Bankruptcy
1100 Charles Ave, Ste 200
Dunbar, WV 25064

On which entry in Part 1 or Part 2 did you list the original creditor?

- Line **4.110** of (Check one):
 Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Leroys Jewelers
Sterling Jewelers, Inc/Attn:
Bankruptcy
Po Box 1799
Akron, OH 44309

On which entry in Part 1 or Part 2 did you list the original creditor?

- Line **4.114** of (Check one):
 Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
LVNV Funding/Resurgent Capital
Attn: Bankruptcy
Po Box 10497
Greenville, SC 29603

On which entry in Part 1 or Part 2 did you list the original creditor?

- Line **4.116** of (Check one):
 Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
LVNV Funding/Resurgent Capital
Attn: Bankruptcy
Po Box 10497
Greenville, SC 29603

On which entry in Part 1 or Part 2 did you list the original creditor?

- Line **4.117** of (Check one):
 Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
LVNV Funding/Resurgent Capital
Attn: Bankruptcy
Po Box 10497
Greenville, SC 29603

On which entry in Part 1 or Part 2 did you list the original creditor?

- Line **4.118** of (Check one):
 Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Debtor 1 **Aaron Drew Glen Withrow**
Debtor 2 **Megan Inez Scites**

Case number (if known) _____

Name and Address

Merrick Bank/CardWorks
Attn: Bankruptcy
Po Box 9201
Old Bethpage, NY 11804

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.121 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Merrick Bank/CardWorks
Attn: Bankruptcy
Po Box 9201
Old Bethpage, NY 11804

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.122 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Merrick Bank/CardWorks
Attn: Bankruptcy
Po Box 9201
Old Bethpage, NY 11804

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.123 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Merrick Bank/CardWorks
Attn: Bankruptcy
Po Box 9201
Old Bethpage, NY 11804

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.124 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Monterey Col
Attn: Bankruptcy
4095 Avenida De La Plata
Oceanside, CA 92056

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.126 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Monterey Col
Attn: Bankruptcy
4095 Avenida De La Plata
Oceanside, CA 92056

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.127 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Second Round, LP
Po Box 41955
Austin, TX 78704

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.137 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Sterling Jewelers, Inc.
Attn: Bankruptcy
Po Box 1799
Akron, OH 44309

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.139 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Synchrony Bank/Gap
Attn: Bankruptcy Dept
Po Box 965060
Orlando, FL 32896

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.142 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Synchrony Bank/Gap
Attn: Bankruptcy Dept
Po Box 965060
Orlando, FL 32896

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.143 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Debtor 1 **Aaron Drew Glen Withrow**
Debtor 2 **Megan Inez Scites**

Case number (if known) _____

Name and Address

Synchrony Bank/Lowes
Attn: Bankruptcy Dept
Po Box 965060
Orlando, FL 32896

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.144** of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Synchrony Bank/Lowes
Attn: Bankruptcy
Po Box 965060
Orlando, FL 32896

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.145** of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Synchrony Bank/Sams
Attn: Bankruptcy
Po Box 965060
Orlando, FL 32896

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.146** of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Synchrony Bank/Sams
Attn: Bankruptcy
Po Box 965060
Orlando, FL 32896

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.147** of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Synchrony Bank/Sams
Attn: Bankruptcy
Po Box 965060
Orlando, FL 32896

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.148** of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Synchrony Bank/Sams
Attn: Bankruptcy
Po Box 965060
Orlando, FL 32896

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.149** of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Synchrony Bank/Walmart
Attn: Bankruptcy Dept
Po Box 965060
Orlando, FL 32896

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.150** of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Synchrony Bank/Walmart
Attn: Bankruptcy
Po Box 965060
Orlando, FL 32896

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.151** of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

The Bureaus Inc
Attn: Bankruptcy
650 Dundee Rd, Ste 370
Northbrook, IL 60062

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.152** of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

The Bureaus Inc
Attn: Bankruptcy
650 Dundee Rd, Ste 370
Northbrook, IL 60062

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.153** of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Debtor 1 **Aaron Drew Glen Withrow**
Debtor 2 **Megan Inez Scites**

Case number (if known) _____

Last 4 digits of account number _____

Name and Address

**Tnb-Visa (TV) / Target
C/O Financial & Retail Services
Mailstop BV PO Box 9475
Minneapolis, MN 55440**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.154** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

**Tnb-Visa (TV) / Target
C/O Financial & Retail Services
Mailstop BV PO Box 9475
Minneapolis, MN 55440**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.155** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

**TSI/Transworld Systems Inc.
Attn: Bankruptcy
Po Box 15630
Wilmington, DE 19850**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.156** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

**TSI/Transworld Systems Inc.
Attn: Bankruptcy
Po Box 15630
Wilmington, DE 19850**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.157** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

**TSI/Transworld Systems Inc.
Attn: Bankruptcy
Po Box 15630
Wilmington, DE 19850**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.158** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

**TSI/Transworld Systems Inc.
Attn: Bankruptcy
Po Box 15630
Wilmington, DE 19850**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.159** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

**TSI/Transworld Systems Inc.
Attn: Bankruptcy
Po Box 15630
Wilmington, DE 19850**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.160** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

**TSI/Transworld Systems Inc.
Attn: Bankruptcy
Po Box 15630
Wilmington, DE 19850**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.161** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

**TSI/Transworld Systems Inc.
Attn: Bankruptcy
Po Box 15630
Wilmington, DE 19850**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.162** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

**TSI/Transworld Systems Inc.
Attn: Bankruptcy
Po Box 15630**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.163** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Debtor 1 **Aaron Drew Glen Withrow**
Debtor 2 **Megan Inez Scites**

Case number (if known) _____

Wilmington, DE 19850

Last 4 digits of account number

Name and Address
TSI/Transworld Systems Inc.
Attn: Bankruptcy
Po Box 15630
Wilmington, DE 19850

On which entry in Part 1 or Part 2 did you list the original creditor?

- Line 4.164 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
TSI/Transworld Systems Inc.
Attn: Bankruptcy
Po Box 15630
Wilmington, DE 19850

On which entry in Part 1 or Part 2 did you list the original creditor?

- Line 4.165 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
TSI/Transworld Systems Inc.
Attn: Bankruptcy
Po Box 15630
Wilmington, DE 19850

On which entry in Part 1 or Part 2 did you list the original creditor?

- Line 4.166 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
TSI/Transworld Systems Inc.
Attn: Bankruptcy
Po Box 15630
Wilmington, DE 19850

On which entry in Part 1 or Part 2 did you list the original creditor?

- Line 4.167 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
TSI/Transworld Systems Inc.
Attn: Bankruptcy
Po Box 15630
Wilmington, DE 19850

On which entry in Part 1 or Part 2 did you list the original creditor?

- Line 4.168 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
TSI/Transworld Systems Inc.
Attn: Bankruptcy
Po Box 15630
Wilmington, DE 19850

On which entry in Part 1 or Part 2 did you list the original creditor?

- Line 4.169 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
US Dept of Education
Attn: Bankruptcy
Po Box 16448
Saint Paul, MN 55116

On which entry in Part 1 or Part 2 did you list the original creditor?

- Line 4.171 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Vanguard Financial Ser
Attn: Bankruptcy
Po Box 1110
Valley Forge, PA 19482

On which entry in Part 1 or Part 2 did you list the original creditor?

- Line 4.173 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Vanguard Financial Ser
Attn: Bankruptcy
Po Box 1110
Valley Forge, PA 19482

On which entry in Part 1 or Part 2 did you list the original creditor?

- Line 4.174 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

Debtor 1 **Aaron Drew Glen Withrow**
Debtor 2 **Megan Inez Scites**

Case number (if known) _____

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

Total claims from Part 1	6a. Domestic support obligations	6a. \$ 0.00	Total Claim
	6b. Taxes and certain other debts you owe the government	6b. \$ 0.00	
	6c. Claims for death or personal injury while you were intoxicated	6c. \$ 0.00	
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. \$ 0.00	
	6e. Total Priority. Add lines 6a through 6d.	6e. \$ 0.00	
Total claims from Part 2	6f. Student loans	6f. \$ 195,177.00	Total Claim
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$ 0.00	
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. \$ 0.00	
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. \$ 115,702.00	
	6j. Total Nonpriority. Add lines 6f through 6i.	6j. \$ 310,879.00	

Fill in this information to identify your case:

Debtor 1	Aaron Drew Glen Withrow		
	First Name	Middle Name	Last Name
Debtor 2	Megan Inez Scites		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	SOUTHERN DISTRICT OF WEST VIRGINIA		
Case number (if known)			

Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

- No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B:Property* (Official Form 106 A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease			State what the contract or lease is for
Name, Number, Street, City, State and ZIP Code			
2.1	Name		
	Number	Street	
	City	State	ZIP Code
2.2	Name		
	Number	Street	
	City	State	ZIP Code
2.3	Name		
	Number	Street	
	City	State	ZIP Code
2.4	Name		
	Number	Street	
	City	State	ZIP Code
2.5	Name		
	Number	Street	
	City	State	ZIP Code

Fill in this information to identify your case:

Debtor 1	Aaron Drew Glen Withrow		
	First Name	Middle Name	Last Name
Debtor 2	Megan Inez Scites		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	SOUTHERN DISTRICT OF WEST VIRGINIA		
Case number (if known)			

Check if this is an amended filing

Official Form 106H Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

- No
 Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- No. Go to line 3.
 Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Name, Number, Street, City, State and ZIP Code

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.1

Name _____

- Schedule D, line _____
 Schedule E/F, line _____
 Schedule G, line _____

Number _____ Street _____ State _____ ZIP Code _____

3.2

Name _____

- Schedule D, line _____
 Schedule E/F, line _____
 Schedule G, line _____

Number _____ Street _____ State _____ ZIP Code _____

Fill in this information to identify your case:

Debtor 1	Aaron Drew Glen Withrow
Debtor 2 (Spouse, if filing)	Megan Inez Scites
United States Bankruptcy Court for the:	SOUTHERN DISTRICT OF WEST VIRGINIA
Case number (if known)	

Check if this is:

- An amended filing
 A supplement showing postpetition chapter 13 income as of the following date:
MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

	Debtor 1	Debtor 2 or non-filing spouse
Employment status	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed
Occupation	EMT	Unit Clerk
Employer's name	Securitas	Encompass Health
Employer's address	Charleston, WV 25301	Milton, WV 25541
How long employed there?	4 months	9 yrs

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2. \$ 1,779.51	\$ 2,166.00
3. Estimate and list monthly overtime pay.	3. +\$ 0.00	+\$ 0.00
4. Calculate gross income. Add line 2 + line 3.	4. \$ 1,779.51	\$ 2,166.00

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

Copy line 4 here	For Debtor 1	For Debtor 2 or non-filing spouse
5. List all payroll deductions:	4. \$ <u>1,779.51</u>	\$ <u>2,166.00</u>
5a. Tax, Medicare, and Social Security deductions	5a. \$ <u>359.62</u>	\$ <u>353.25</u>
5b. Mandatory contributions for retirement plans	5b. \$ <u>0.00</u>	\$ <u>0.00</u>
5c. Voluntary contributions for retirement plans	5c. \$ <u>0.00</u>	\$ <u>0.00</u>
5d. Required repayments of retirement fund loans	5d. \$ <u>0.00</u>	\$ <u>0.00</u>
5e. Insurance	5e. \$ <u>0.00</u>	\$ <u>0.00</u>
5f. Domestic support obligations	5f. \$ <u>0.00</u>	\$ <u>0.00</u>
5g. Union dues	5g. \$ <u>0.00</u>	\$ <u>0.00</u>
5h. Other deductions. Specify: _____	5h.+ \$ <u>0.00</u>	+ \$ <u>0.00</u>
6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6. \$ <u>359.62</u>	\$ <u>353.25</u>
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ <u>1,419.89</u>	\$ <u>1,812.75</u>
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ <u>0.00</u>	\$ <u>0.00</u>
8b. Interest and dividends	8b. \$ <u>0.00</u>	\$ <u>0.00</u>
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ <u>0.00</u>	\$ <u>0.00</u>
8d. Unemployment compensation	8d. \$ <u>0.00</u>	\$ <u>0.00</u>
8e. Social Security	8e. \$ <u>0.00</u>	\$ <u>0.00</u>
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f. \$ <u>0.00</u>	\$ <u>0.00</u>
8g. Pension or retirement income	8g. \$ <u>0.00</u>	\$ <u>0.00</u>
8h. Other monthly income. Specify: _____	8h.+ \$ <u>0.00</u>	+ \$ <u>0.00</u>
9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9. \$ <u>0.00</u>	\$ <u>0.00</u>
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ <u>1,419.89</u>	+ \$ <u>1,812.75</u> = \$ <u>3,232.64</u>
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____	11. +\$ <u>0.00</u>	
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies	12. \$ <u>3,232.64</u>	
13. Do you expect an increase or decrease within the year after you file this form?		
<input checked="" type="checkbox"/> No.		
<input type="checkbox"/> Yes. Explain: _____		

Fill in this information to identify your case:

Debtor 1	Aaron Drew Glen Withrow
Debtor 2	Megan Inez Scites
(Spouse, if filing)	
United States Bankruptcy Court for the:	<u>SOUTHERN DISTRICT OF WEST VIRGINIA</u>
Case number (If known)	

Check if this is:

- An amended filing
 A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

- No. Go to line 2.
 Yes. Does Debtor 2 live in a separate household?

No

Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

2. Do you have dependents? No

Do not list Debtor 1 and
Debtor 2.

Yes. Fill out this information for
each dependent.....

Dependent's relationship to
Debtor 1 or Debtor 2

Dependent's
age

Does dependent
live with you?

Do not state the
dependents names.

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- No
 Yes
 No
 Yes
 No
 Yes
 No
 Yes

3. Do your expenses include expenses of people other than yourself and your dependents? No Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ 350.00

Your expenses

If not included in line 4:

- 4a. Real estate taxes
4b. Property, homeowner's, or renter's insurance
4c. Home maintenance, repair, and upkeep expenses
4d. Homeowner's association or condominium dues

4a. \$ 0.00
4b. \$ 0.00
4c. \$ 0.00
4d. \$ 0.00
5. Additional mortgage payments for your residence, such as home equity loans

5. \$ 0.00

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

6. Utilities:

6a. Electricity, heat, natural gas	6a. \$ 0.00
6b. Water, sewer, garbage collection	6b. \$ 0.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$ 304.00
6d. Other. Specify: _____	6d. \$ 0.00

7. Food and housekeeping supplies

8. Childcare and children's education costs	7. \$ 700.00
9. Clothing, laundry, and dry cleaning	8. \$ 0.00

10. Personal care products and services

11. Medical and dental expenses	9. \$ 150.00
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	10. \$ 150.00

13. Entertainment, clubs, recreation, newspapers, magazines, and books

14. Charitable contributions and religious donations	11. \$ 250.00
15. Insurance.	12. \$ 450.00

Do not include insurance deducted from your pay or included in lines 4 or 20.

15a. Life insurance	15a. \$ 0.00
15b. Health insurance	15b. \$ 0.00
15c. Vehicle insurance	15c. \$ 107.00
15d. Other insurance. Specify: _____	15d. \$ 0.00

16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.

Specify: _____	16. \$ 0.00
17. Installment or lease payments:	17a. \$ 586.00
17a. Car payments for Vehicle 1	17b. \$ 250.00
17b. Car payments for Vehicle 2	17c. \$ 0.00
17c. Other. Specify: _____	17d. \$ 0.00
17d. Other. Specify: _____	

18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).

19. Other payments you make to support others who do not live with you.

Specify: _____	18. \$ 0.00
	\$ 0.00
	19.

20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.

20a. Mortgages on other property	20a. \$ 0.00
20b. Real estate taxes	20b. \$ 0.00
20c. Property, homeowner's, or renter's insurance	20c. \$ 0.00
20d. Maintenance, repair, and upkeep expenses	20d. \$ 0.00
20e. Homeowner's association or condominium dues	20e. \$ 0.00
21. Other: Specify: _____	21. +\$ 0.00

22. Calculate your monthly expenses

22a. Add lines 4 through 21.	\$ 3,497.00
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$ 3,497.00
22c. Add line 22a and 22b. The result is your monthly expenses.	

23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$ 3,232.64
23b. Copy your monthly expenses from line 22c above.	23b. -\$ 3,497.00
23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c. \$ -264.36

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

Yes.

Explain here: _____

Fill in this information to identify your case:

Debtor 1	Aaron Drew Glen Withrow		
	First Name	Middle Name	Last Name
Debtor 2	Megan Inez Scites		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	SOUTHERN DISTRICT OF WEST VIRGINIA		
Case number (if known)			

Check if this is an amended filing

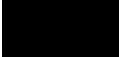
Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

 Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person _____

Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Aaron Drew Glen Withrow

Aaron Drew Glen Withrow

Signature of Debtor 1

Date March 21, 2019

X /s/ Megan Inez Scites

Megan Inez Scites

Signature of Debtor 2

Date March 21, 2019

Fill in this information to identify your case:

Debtor 1	Aaron Drew Glen Withrow		
	First Name	Middle Name	Last Name
Debtor 2	Megan Inez Scites		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	SOUTHERN DISTRICT OF WEST VIRGINIA		
Case number (if known)			

Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current marital status?

- Married
 Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

- No
 Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1 Prior Address:

Dates Debtor 1
lived there

Debtor 2 Prior Address:

Dates Debtor 2
lived there

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)

- No
 Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Part 2 Explain the Sources of Your Income

4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.
If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

- No
 Yes. Fill in the details.

From January 1 of current year until the date you filed for bankruptcy:	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$2,000.00	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$3,000.00

Debtor 1 **Aaron Drew Glen Withrow**
Debtor 2 **Megan Inez Scites**

Case number (if known) _____

	Debtor 1	Debtor 2		
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2018)	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$24,000.00	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$25,997.00
For the calendar year before that: (January 1 to December 31, 2017)	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$17,783.00	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$34,497.00

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

- No
- Yes. Fill in the details.

Debtor 1	Debtor 2		
Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy**6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

- No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?

- No. Go to line 7.
- Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

- Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

- No. Go to line 7.
- Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for ...

Debtor 1 Aaron Drew Glen Withrow
Debtor 2 Megan Inez Scites

Case number (if known) _____

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

 No Yes. List all payments to an insider.

Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
----------------------------	------------------	-------------------	----------------------	-------------------------

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?

Include payments on debts guaranteed or cosigned by an insider.

 No Yes. List all payments to an insider.

Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
----------------------------	------------------	-------------------	----------------------	-------------------------

Part 4: Identify Legal Actions, Repossessions, and Foreclosures**9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

 No Yes. Fill in the details.

Case title Case number	Nature of the case	Court or agency	Status of the case
---------------------------	--------------------	-----------------	--------------------

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?

Check all that apply and fill in the details below.

 No. Go to line 11. Yes. Fill in the information below.

Creditor Name and Address	Describe the Property	Date	Value of the property
GM Financial P. O. Box 181145 Arlington, TX 76096	Explain what happened 2017 Cruz	2018	Unknown

Property was repossessed.
 Property was foreclosed.
 Property was garnished.
 Property was attached, seized or levied.

CNAC PO Box 8481 Charleston, WV 25303	2010 Chevy Equinox	2018	Unknown
	<input checked="" type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized or levied.		

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details.

Creditor Name and Address	Describe the action the creditor took	Date action was taken	Amount
---------------------------	---------------------------------------	-----------------------	--------

Debtor 1 **Aaron Drew Glen Withrow**
 Debtor 2 **Megan Inez Scites**

Case number (if known) _____

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

No
 Yes

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

No
 Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift and Address:			

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

No
 Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than \$600	Charity's Name	Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value
--	----------------	--	-------------------------------	-----------------------	-------

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

No
 Yes. Fill in the details.

Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss	Date of your loss	Value of property lost
	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.		

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

No
 Yes. Fill in the details.

Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Stapleton Law Offices 400 Fifth Avenue Huntington, WV 25701	\$950.00		\$950.00
abacuscc.org	\$25.00		\$25.00

Debtor 1 Aaron Drew Glen Withrow
 Debtor 2 Megan Inez Scites

Case number (if known)

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?
 Do not include any payment or transfer that you listed on line 16.

No
 Yes. Fill in the details.

Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
--------------------------------	---	-----------------------------------	-------------------

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

No
 Yes. Fill in the details.

Person Who Received Transfer Address	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
Person's relationship to you			

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

No
 Yes. Fill in the details.

Name of trust	Description and value of the property transferred	Date Transfer was made
---------------	---	------------------------

Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

No
 Yes. Fill in the details.

Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
--	---------------------------------	-------------------------------	--	---

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

No
 Yes. Fill in the details.

Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
--	---	-----------------------	-----------------------

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

No
 Yes. Fill in the details.

Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
---	--	-----------------------	-----------------------

Debtor 1 Aaron Drew Glen Withrow
 Debtor 2 Megan Inez Scites

Case number (if known)

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

No

Yes. Fill in the details.

Owner's Name	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
--------------	--	-----------------------	-------

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- Environmental law* means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site* means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material* means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

No

Yes. Fill in the details.

Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
--	---	-----------------------------------	----------------

25. Have you notified any governmental unit of any release of hazardous material?

No

Yes. Fill in the details.

Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
--	---	-----------------------------------	----------------

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

No

Yes. Fill in the details.

Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
---------------------------	---	--------------------	--------------------

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
- A member of a limited liability company (LLC) or limited liability partnership (LLP)
- A partner in a partnership
- An officer, director, or managing executive of a corporation
- An owner of at least 5% of the voting or equity securities of a corporation

Debtor 1 **Aaron Drew Glen Withrow**
Debtor 2 **Megan Inez Scites**

Case number (if known) _____

- No. None of the above applies. Go to Part 12.
 Yes. Check all that apply above and fill in the details below for each business.

Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. Dates business existed
--	---	--

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

- No
 Yes. Fill in the details below.

Name Address (Number, Street, City, State and ZIP Code)	Date Issued
---	-------------

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.
18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Aaron Drew Glen Withrow
Aaron Drew Glen Withrow
Signature of Debtor 1

Date March 21, 2019

/s/ Megan Inez Scites
Megan Inez Scites
Signature of Debtor 2

Date March 21, 2019

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

- No
 Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

- No
 Yes. Name of Person _____. Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Fill in this information to identify your case:

Debtor 1	Aaron Drew Glen Withrow		
	First Name	Middle Name	Last Name
Debtor 2	Megan Inez Scites		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	SOUTHERN DISTRICT OF WEST VIRGINIA		
Case number (if known)			

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
---	---	---

Creditor's name: **Exeter Finance Corp**

- Surrender the property.
- Retain the property and redeem it.
- Retain the property and enter into a *Reaffirmation Agreement*.
- Retain the property and [explain]:
retain

No

Yes

Description of property securing debt: **2017 Jeep Renegade**

Creditor's name: **Fairchild Auto**

- Surrender the property.
- Retain the property and redeem it.
- Retain the property and enter into a *Reaffirmation Agreement*.
- Retain the property and [explain]:

No

Yes

Description of property securing debt: **2009 Ford Flex**

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will the lease be assumed?

Debtor 1 **Aaron Drew Glen Withrow**
Debtor 2 **Megan Inez Scites**

Case number (if known) _____

Lessor's name:
Description of leased
Property:

No
 Yes

Part 3: Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

X /s/ Aaron Drew Glen Withrow

Aaron Drew Glen Withrow

Signature of Debtor 1

X /s/ Megan Inez Scites

Megan Inez Scites

Signature of Debtor 2

Date March 21, 2019

Date March 21, 2019

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,
and

Your debts are primarily consumer debts.
Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

\$245 filing fee

\$75 administrative fee

+ \$15 trustee surcharge

\$335 total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167	filing fee
+ \$550	administrative fee
\$1,717 total fee	

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

\$200	filing fee
+ \$75	<u>administrative fee</u>
\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

\$235	filing fee
+ \$75	<u>administrative fee</u>
\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_form_s.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to:

<http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx>

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court
Southern District of West Virginia

In re **Aaron Drew Glen Withrow**
Megan Inez Scites

Debtor(s)

Case No.

Chapter

7

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept	\$	1,500.00 or less
Prior to the filing of this statement I have received	\$	950.00
Balance Due	\$	550.00 or less

2. \$ **0.00** of the filing fee has been paid.

3. The source of the compensation paid to me was:

Debtor Other (specify):

4. The source of compensation to be paid to me is:

Debtor Other (specify):

5. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding, attempting to discharge student loans, negotiating or preparing or filing reaffirmation agreements, or anything else of any nature other than those things expressly listed in item 6 of this document.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

March 21, 2019

Date

/s/ Scott G. Stapleton

Scott G. Stapleton 3568

Signature of Attorney

Stapleton Law Offices

400 Fifth Avenue

Huntington, WV 25701

304-529-7391 Fax: 304-529-0103

bankrupter@charter.net

Name of law firm

**United States Bankruptcy Court
Southern District of West Virginia**

In re **Aaron Drew Glen Withrow
Megan Inez Scites**

Debtor(s)

Case No.

Chapter

7

VERIFICATION OF CREDITOR MATRIX

The above-named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowledge.

Date: **March 21, 2019**

/s/ Aaron Drew Glen Withrow

Aaron Drew Glen Withrow

Signature of Debtor

Date: **March 21, 2019**

/s/ Megan Inez Scites

Megan Inez Scites

Signature of Debtor

Aes/pnc Bank
Pob 61047
Harrisburg, PA 17106

Aes/pnc Bank
Attn: Bankruptcy Dept
Po Box 2461
Harrisburg, PA 17105

AmeriCredit/GM Financial
Po Box 181145
Arlington, TX 76096

AmeriCredit/GM Financial
Attn: Bankruptcy
Po Box 183853
Arlington, TX 76096

Ashland Credit Union
1300 Central Ave
Ashland, KY 41101

Cabell Huntington Hospital
P O Box 580021
Charlotte, NC 28258-0021

Cabell Urgent Care
1 Stonecrest Drive
Huntington, WV 25701-9391

Capital Management Services
726 Exchange St., Suite 700
Buffalo, NY 14210-1494

Capital One
15000 Capital One Dr
Richmond, VA 23238

Capital One
Po Box 30253
Salt Lake City, UT 84130

Capital One
Attn: Bankruptcy
Po Box 30285
Salt Lake City, UT 84130

Carson Smithfield Advanta
P.O. Box 9216
Old Bethpage, NY 11804-9216

Chase Card Services
Po Box 15298
Wilmington, DE 19850

Chase Card Services
Correspondence Dept
Po Box 15298
Wilmington, DE 19850

Chase Card Services
Attn: Bankruptcy
Po Box 15298
Wilmington, DE 19850

Citibank/The Home Depot
Po Box 6497
Sioux Falls, SD 57117

Citibank/The Home Depot
Centralized Bankruptcy
Po Box 790034
St Louis, MO 63179

Citibank/The Home Depot
Attn: Recovery/Centralized Bankruptcy
Po Box 790034
St Louis, MO 63179

CitiFinancial
4010 Regent Blvd
Irving, TX 75063

Client Services
3451 Harry Truman Blvd
Saint Charles, MO 63301

CNAC
PO Box 8481
Charleston, WV 25303

Cnac - Oh128
200 Greene Ave
Marietta, OH 45750

Cnac - Oh128
200 Green St
Marietta, OH 45750

Comenity Bank/Dress Barn
Po Box 182789
Columbus, OH 43218

Comenity Bank/Dress Barn
Attn: Bankruptcy Dept
Po Box 182125
Columbus, OH 43218

Comenity Bank/Dress Barn
Attn: Bankruptcy
Po Box 182125
Columbus, OH 43218

Comenity Bank/Torrid
Po Box 182789
Columbus, OH 43218

Comenity Bank/Torrid
Attn: Bankruptcy Dept
Po Box 182125
Columbus, OH 43218

Comenity Bank/Torrid
Attn: Bankruptcy
Po Box 182125
Columbus, OH 43218

Comenity Bkl/Ulta
Po Box 182120
Columbus, OH 43218

Comenity Bkl/Ulta
Attn: Bankruptcy Dept
Po Box 182125
Columbus, OH 43218

Credit One Bank
Po Box 98872
Las Vegas, NV 89193

Credit One Bank
Attn: Bankruptcy
Po Box 98873
Las Vegas, NV 89193

Credit One Bank
Attn: Bankruptcy Department
Po Box 98873
Las Vegas, NV 89193

Debt Collection Partne
11 Commerce Dr Ste 208
Westover, WV 26501

Debt Collection Partners
11 Commerce Dr Ste 208
Westover, WV 26501

Debt Collection Partners
Wes Mon Building 2
11 Commerce Dr, Ste 208
Westover, WV 26501

Department of Education/Nelnet
3015 Parker Rd
Aurora, CO 80014

Department of Education/Nelnet
Attn: Claims
Po Box 82505
Lincoln, NE 68501

Dept of Ed / 582 / Nelnet
121 S 13th St
Lincoln, NE 68508

Dept of Ed / 582 / Nelnet
Attn: Claims
Po Box 82505
Lincoln, NE 68501

Dept of Ed / Navient
Po Box 9635
Wilkes Barre, PA 18773

Dept of Ed / Navient
Attn: Claims Dept
Po Box 9635
Wilkes Barr, PA 18773

Direct TV / AT&T
c/o Bankruptcy
4331 Communications Dr., Floor 4W
Dallas, TX 75211

Exeter Finance Corp
Po Box 166097
Irving, TX 75016

Exeter Finance Corp
Po Box 166008
Irving, TX 75016

Fairchild Auto
10711 US Rt. 23
Greenup, KY 41144

Fingerhut
6250 Ridgewood Road
Saint Cloud, MN 56303

Fingerhut
Bankruptcy Dept
6250 Ridgewood Rd
Saint Cloud, MN 56303

First National Credit Card/Legacy
500 East 60th St North
Sioux Falls, SD 57104

First National Credit Card/Legacy
First National Credit Card
Po Box 5097
Sioux Falls, SD 51117

First Premier Bank
601 S Minnesota Ave
Sioux Falls, SD 57104

First Saving Bank / Blaze
5501 S Broadband Ln
Sioux Falls, SD 57108

First Saving Bank / Blaze
500 E. 60th Street
Sioux Falls, SD 57104

First Saving Bank / Blaze
Attn: Bankruptcy
Po Box 5096
Sioux Falls, SD 57117

First Source Advantage
205 Bryant Woods South
Buffalo, NY 14228

Flex Shopper.com
Attn.: Legal Dept.
27 North Military Trail, Suite 200
Boca Raton, FL 33431

Fm/keybank
121 S 13th St Ste 201
Lincoln, NE 68508

Glelsi/key Education R
2401 International Lane
Madison, WI 53704

GM Financial
P. O. Box 181145
Arlington, TX 76096

Halstead Financial
P. O.Box 828
Skokie, IL 60076

Healthcare Financial S
1204 Kanawha Blvd E
Charleston, WV 25301

Healthcare Financial S
1204 Kanawha Bv E
Charleston, WV 25338

Healthcare Financial S
Attn: Bankruptcy
Po Box 3882
Charleston, WV 25338

Ibo/credit
1100 Charles Ave Suite 200
Dunbar, WV 25064

IBO/Credit Services
1100 Charles Ave Suite 200
Dunbar, WV 25064

IBO/Credit Services
Attn: Bankruptcy
1100 Charles Ave, Ste 200
Dunbar, WV 25064

ITT Technical
Faegre Baker Daniels, LLP
600 East 96th St., Suitre 600
Indianapolis, IN 46240

Key Bank First Mark Services
P. O. Box 2977
Omaha, NE 68103

Kings Daughters Medical Center
2201 Lexington Ave.
Ashland, KY 41101

Leroys Jewelers
375 Ghent Rd
Fairlawn, OH 44333

Leroys Jewelers
Sterling Jewelers, Inc/Attn: Bankruptcy
Po Box 1799
Akron, OH 44309

LVNV Funding/Resurgent Capital
C/o Resurgent Capital Services
Greenville, SC 29602

LVNV Funding/Resurgent Capital
Attn: Bankruptcy
Po Box 10497
Greenville, SC 29603

Marshall health
1600 Medical Center Sr.
Huntington, WV 25701

Medtronic
13019 Collections Center Dr.
Chicago, IL 60693

Merrick Bank/CardWorks
Pob 9201
Old Bethpage, NY 11804

Merrick Bank/CardWorks
Po Box 9201
Old Bethpage, NY 11804

Merrick Bank/CardWorks
Attn: Bankruptcy
Po Box 9201
Old Bethpage, NY 11804

Midland Credit Management
P. O. Box 301030
Los Angeles, CA 90030

Monterey Col
4095 Avenida De La Plata
Oceanside, CA 92056

Monterey Col
4095 Avenida De La Playa
Oceanside, CA 92056

Monterey Col
Attn: Bankruptcy
4095 Avenida De La Plata
Oceanside, CA 92056

Mountwest Community & Tech
One Mountwest Way
Huntington, WV 25701

MRS Associates
3 Executive Campus, Suite 400
Cherry Hill, NJ 08002-4103

Nationwide Insurance
Credit Collection Services
725 Canton St.
Norwood, MA 02062

NorthStar Anethstesia
P. O. Box 610831
Dallas, TX 75261-0831

Portfolio Recovery Associates
P. O. Box 12914
Norfolk, VA 23541

Progressive Leasing
256 West Data Drive
Draper, UT 84020

Radiology Inc.
P. O. Box 910
Huntington, WV 25712-0910

RGS Financial
P.O. Box 852039
Richardson, TX 75085-2039

Second Round
P. O. Box 41955
Austin, TX 78704

Second Round, LP
4150 Freidrich Lane
Austin, TX 78744

Second Round, LP
Po Box 41955
Austin, TX 78704

SMMC
2900 1st Ave.
Huntington, WV 25701

Sterling Jewelers, Inc.
375 Ghent Rd
Fairlawn, OH 44333

Sterling Jewelers, Inc.
Attn: Bankruptcy
Po Box 1799
Akron, OH 44309

Stoneleigh Recovery Associates
PO BOX 1118
Charlotte, NC 28201-1180

Synchrony Bank/ Old Navy
Po Box 965005
Orlando, FL 32896

Synchrony Bank/Gap
Po Box 965005
Orlando, FL 32896

Synchrony Bank/Gap
Attn: Bankruptcy Dept
Po Box 965060
Orlando, FL 32896

Synchrony Bank/Lowes
Po Box 965005
Orlando, FL 32896

Synchrony Bank/Lowes
Po Box 956005
Orlando, FL 32896

Synchrony Bank/Lowes
Attn: Bankruptcy Dept
Po Box 965060
Orlando, FL 32896

Synchrony Bank/Lowes
Attn: Bankruptcy
Po Box 965060
Orlando, FL 32896

Synchrony Bank/Sams
Po Box 965005
Orlando, FL 32896

Synchrony Bank/Sams
Attn: Bankruptcy
Po Box 965060
Orlando, FL 32896

Synchrony Bank/Walmart
Po Box 965024
Orlando, FL 32896

Synchrony Bank/Walmart
Attn: Bankruptcy Dept
Po Box 965060
Orlando, FL 32896

Synchrony Bank/Walmart
Attn: Bankruptcy
Po Box 965060
Orlando, FL 32896

The Bureaus Inc
1717 Central St
Evanston, IL 60201

The Bureaus Inc
Attn: Bankruptcy
650 Dundee Rd, Ste 370
Northbrook, IL 60062

Tnb-Visa (TV) / Target
Po Box 673
Minneapolis, MN 55440

Tnb-Visa (TV) / Target
C/O Financial & Retail Services
Mailstop BV PO Box 9475
Minneapolis, MN 55440

TSI/Transworld Systems Inc.
500 Virginia Dr Ste 514
Ft Washington, PA 19034

TSI/Transworld Systems Inc.
Pob 15270
Wilmington, DE 19850

TSI/Transworld Systems Inc.
Attn: Bankruptcy
Po Box 15630
Wilmington, DE 19850

University Physicians & Surgeons
Surgery
1600 Medical Center Drive
Huntington, WV 25701

US Dept of Education
Po Box 5609
Greenville, TX 75403

US Dept of Education
Attn: Bankruptcy
Po Box 16448
Saint Paul, MN 55116

Valley Health Systems
2585 3rd Ave.
Huntington, WV 25703

Vanguard Financial Ser
210 Brook St Ste 100
Charleston, WV 25301

Vanguard Financial Ser
Attn: Bankruptcy
Po Box 1110
Valley Forge, PA 19482